

WEST Search History

DATE: Sunday, July 27, 2003

<u>Set Name</u> side by side	<u>Query</u>	<u>Hit Count</u>	<u>Set Name</u> result set
<i>DB=USPT,PGPB,JPAB,EPAB,DWPI; PLUR=YES; OP=ADJ</i>			
L12	antiport with modulator	3	L12
L11	antiport near modulator	1	L11
<i>DB=; PLUR=YES; OP=ADJ</i>			
L10	l5 and L9	59	L10
L9	timolol	2181	L9
L8	l3 and l6	1	L8
L7	l5 and L6	1	L7
L6	cariporide	31	L6
L5	l3 and L4	263	L5
L4	l1 or l2	32589	L4
L3	glaucoma	12202	L3
L2	sodium with exchange\$2	26546	L2
<i>DB=USPT,PGPB; PLUR=YES; OP=ADJ</i>			
L1	chloride with exchange\$2	10576	L1

END OF SEARCH HISTORY

Viprinex
(ancrod) (III)

Knoll

stroke

HOE 901 (insulin glargine) (III)	HMR	associated with ESRD types 1 and 2 diabetes
nerve growth factor (III)	Genentech	diabetic peripheral neuropathy
Pimagedine (aminoguanidine) (III)	Alteon	diabetes, ESRD
pramlintide (III)	Amylin	diabetes
zopolrestat (III)	Pfizer	diabetic neuropathy
Starlix	Novartis	glaucoma
(nateglinide) (III)		
Cynt (moxonidine) (III)	Lilly/Solvay	hypertension
HOE 642A (cariporide) (III)	HMR	acute coronary syndrome
lanotepase (III)	BMS	acute myocardial infarction
Micardis (telmisartan) (AS)	Boehr Ingelheim	hypertension
omapatrilat (III)	BMS	hypertension
Teveten (eprosartan) (IV)	SB/Int'l Society on Hypertension in Blacks	hypertension
TNK (2nd generation TPA) (III)	Genentech	acute MI
Ariflo (DPE IV inhibitor) (III)	SB	COPD
FluMist (live attenuated intranasal flu vaccine) (AS)	Aviron	influenza
Foradil (formoterol mumaratae powder for inhalation) (AS)	Novartis	asthma, COPD
neuraminidase inhibitor (III)	Roche	influenza
Oxsodrol (superoxide dismutase) (III)	BioTechnology General	prevention of bronchopulmonary dysplasia in premature infants
Relenza (zanamivir) (III)	Glaxo Wellcome	influenza
Surfaxin (lucinactant) (III)	Discovery Laboratories	acute respiratory distress syndrome in adults
Synercid (quinupristin/ dalfopristin) (AS)	RPR	nosocomial pneumonia
Tequin (gatifloxacin) (III)	BMS	pneumonia
Cordox (fructose-1,6 diphosphate) (III)	Cypros	sickle cell disease
Flocor (poloxamer 188, purified) (III)	CytRx	sickle cell disease
CerAxon (citicoline) (III)	Interneuron	stroke
GV150526 (III)	Glaxo Wellcome	stroke

been elucidated. We have studied continuously cultured bovine PE cells. Acid-activated 22Na+ uptake was inhibited by **cariporide**, EIPA (ethyl-isopropyl-amiloride) and amiloride, at concentrations characteristic of the NHE-1 isoform. Videomicroscopy of BCECF-loaded PE cells verified the presence of. . .

IT
of Organisms

aqueous humor: sensory system; ciliary epithelium: sensory system; gap junctions; pigmented ciliary epithelial cell: sensory system

IT Diseases

glaucoma: eye disease

IT Chemicals & Biochemicals

chloride ion hydrogen bicarbonate antiporters; chloride ions; sodium ion: uptake; sodium ion hydrogen ion antiporters

IT Alternate Indexing

Glaucoma (MeSH)

L37 ANSWER 4 OF 4 PHIN COPYRIGHT 2003 PJB on STN

ACCESSION NUMBER: 1998:15688 PHIN

DOCUMENT NUMBER: S00593210

DATA ENTRY DATE: 27 Aug 1998

TITLE: 156 drugs for African-Americans studied

SOURCE: Scrip-Online-plus (1998)

DOCUMENT TYPE: Newsletter

FILE SEGMENT: FULL

TX This . . . such as asthma; 27 for heart disease/hypertension; 18 for HIV infection; 16 for diabetes; nine for stroke; five each for **glaucoma** and sickle cell disease; and four for end-stage renal disease (ESRD).

TX **Glaucoma** occurs six to eight times more often among African-Americans than whites, and it occurs earlier - by age 70, one in ten has **glaucoma**, compared with one in 50 whites.

TX

Product (status)	Company	Indication
abacavir (II/III)	Glaxo Wellcome	HIV infection
amprenavir (III)	Glaxo Wellcome	HIV infection Preveon
(II/III)	Gilead Sciences	HIV infection
(adefovir dipivoxil)		
Provir (III)	Shaman	HIV infection
valganciclovir (III)	Roche	HIV infection
AG3340 (II/III)	Agouron	prostate cancer
dendritic cell therapy (II/III)	Dendreon	prostate cancer
Eloxatin (III)	Sanofi	liver, pancreatic cancer
(oxaliplatin)		
eniluracil (II/III)	Glaxo Wellcome	pancreatic cancer
exisulind/FGN-1 (II/III)	Cell Pathways	prevention of recurrence after prostatectomy
Lutrin (photodynamic therapy) (II/III)	Pharmacyclics	pancreatic, prostate cancers
Maxamine (histamine dihydrochloride) (III)	Maxim	multiple myeloma, prostate cancer
Mitalactol (III)	Biopharmaceutics	cervical cancer
satraplatin (III)	BMS	prostate cancer
Avandi (III)	SmithKline Beecham	diabetes
Avapro (irbesartan) (III/AS)	BMS	diabetic neuropathy, ESRD, hypertension
Hectoral (1-alpha-hydroxy vitamin D2) (AS)	Bone Care Int'l	secondary hyperparathyroidism

cariporide, particularly in combination with bumetanide to simultaneously block the symport.
DETD . . . A therapeutically effective amount of the combined agent is that amount necessary to significantly reduce or eliminate symptoms associated with **glaucoma**, particularly to reduce or prevent elevated IOP more effectively than the effect of one of the compositions alone would have. . . .

L37 ANSWER 2 OF 4 CAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER: 2000:814312 CAPLUS
DOCUMENT NUMBER: 133:344642
TITLE: Methods using antiport modulators for controlling intraocular pressure
INVENTOR(S): Civan, Mortimer M.; MacKnight, Anthony D.
PATENT ASSIGNEE(S): The Trustees of the University of Pennsylvania, USA
SOURCE: PCT Int. Appl., 65 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000067756	A1	20001116	WO 2000-US12551	20000508

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: US 1999-133180P P 19990507
REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ST intraocular pressure **glaucoma** treatment antiport modulator; sodium proton exchanger modulation intraocular pressure; chloride bicarbonate exchanger modulation intraocular pressure
IT 100-88-9, Cyclamate 1154-25-2 1214-79-5, Dimethylamiloride 2609-46-3, Amiloride 2609-46-3D, Amiloride, analogs 26839-75-8, Timolol **159138-80-4, Cariporide**
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(antiport modulators for controlling intraocular pressure)

L37 ANSWER 3 OF 4 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN
DUPLICATE 1

ACCESSION NUMBER: 2000:449189 BIOSIS
DOCUMENT NUMBER: PREV200000449189
TITLE: Na⁺/H⁺ and Cl⁻/HCO₃⁻ antiporters of bovine pigmented ciliary epithelial cells.
AUTHOR(S): Counillon, L.; Touret, Nicolas; Bidet, Michel; Peterson-Yantorno, K.; Coca-Prados, M.; Stuart-Tilley, Alan; Wilhelm, Sabine; Alper, S. L.; Civan, M. M. (1)
CORPORATE SOURCE: (1) Depts. of Physiology and Medicine, University of Pennsylvania, A303 Richards Building, Philadelphia, PA, 19104-6085 USA
SOURCE: Pfluegers Archiv European Journal of Physiology, (September, 2000) Vol. 440, No. 5, pp. 667-678. print. ISSN: 0031-6768.
DOCUMENT TYPE: Article
LANGUAGE: English
SUMMARY LANGUAGE: English
AB Medical therapy of **glaucoma** commonly aims at slowing aqueous humor formation by the ocular ciliary epithelial bilayer, but underlying mechanisms are poorly understood. The . . . paired antiporters have not

=> s timolol/cn
L1 1 TIMOLOL/CN

=> d 11

L1 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2003 ACS on STN
RN 26839-75-8 REGISTRY
CN 2-Propanol, 1-[(1,1-dimethylethyl)amino]-3-[[4-(4-morpholinyl)-1,2,5-thiadiazol-3-yl]oxy]-, (2S)- (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN 1,2,5-Thiadiazole, 2-propanol deriv.
CN 2-Propanol, 1-(tert-butylamino)-3-[[4-morpholino-1,2,5-thiadiazol-3-yl]oxy]-, (S)-(-)- (8CI)
CN 2-Propanol, 1-[(1,1-dimethylethyl)amino]-3-[[4-(4-morpholinyl)-1,2,5-thiadiazol-3-yl]oxy]-, (S)-

OTHER NAMES:

CN (-)-S-Timolol
CN (-)-Timolol
CN (S)-Timolol
CN 1-Timolol
CN L-Timolol
CN Oftensin
CN Timolol

FS STEREOSEARCH

DR 131628-37-0, 194288-09-0

MF C13 H24 N4 O3 S

CI COM

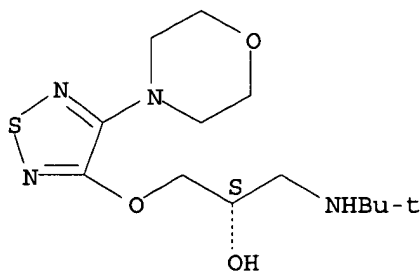
LC STN Files: ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*, BIOBUSINESS, BIOSIS, BIOTECHNO, CA, CANCERLIT, CAPLUS, CASREACT, CBNB, CHEMLIST, CIN, CSCHEM, DDFU, DIOGENES, DRUGPAT, DRUGU, EMBASE, HSDB*, IFICDB, IFIPAT, IFIUDB, IPA, MEDLINE, MRCK*, NIOSHTIC, PHAR, PHARMASEARCH, PROMT, SPECINFO, TOXCENTER, USPAT2, USPATFULL, VETU

(*File contains numerically searchable property data)

Other Sources: EINECS**, NDSL**, TSCA**, WHO

(**Enter CHEMLIST File for up-to-date regulatory information)

Absolute stereochemistry. Rotation (-).



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

1161 REFERENCES IN FILE CA (1947 TO DATE)

19 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA

1164 REFERENCES IN FILE CAPLUS (1947 TO DATE)

=> s amiloride/cn
L2 1 AMILORIDE/CN

=> d 12

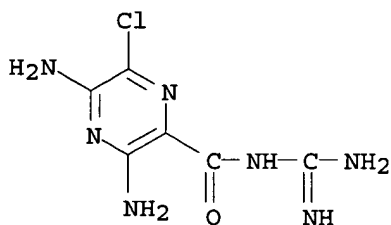
L2 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2003 ACS on STN

RN 2609-46-3 REGISTRY

CN Pyrazinecarboxamide, 3,5-diamino-N-(aminoiminomethyl)-6-chloro- (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Pyrazinecarboxamide, N-amidino-3,5-diamino-6-chloro- (7CI, 8CI)
 OTHER NAMES:
 CN (3,5-Diamino-6-chloropyrazinoyl)guanidine
 CN **Amiloride**
 CN Amipramidin
 CN Guanamprazine
 CN MK 870
 CN N-Amidino-3,5-diamino-6-chloropyrazinecarboxamide
 FS 3D CONCORD
 DR 137053-85-1
 MF C6 H8 Cl N7 O
 CI COM
 LC STN Files: ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*, BIOBUSINESS, BIOSIS,
 BIOTECHNO, CA, CANCERLIT, CAOLD, CAPLUS, CASREACT, CBNB, CEN, CHEMCATS,
 CHEMLIST, CIN, CSCHM, DDFU, DIOGENES, DRUGPAT, DRUGU, EMBASE, IFICDB,
 IFIPAT, IFIUDB, IPA, MEDLINE, MRCK*, NIOSHTIC, PHAR, PROMT, SPECINFO,
 TOXCENTER, USAN, USPAT2, USPATFULL
 (*File contains numerically searchable property data)
 Other Sources: EINECS**, WHO
 (**Enter CHEMLIST File for up-to-date regulatory information)



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

1952 REFERENCES IN FILE CA (1947 TO DATE)
 109 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
 1957 REFERENCES IN FILE CAPLUS (1947 TO DATE)
 1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

=> s ethyl isopropyl amiloride
 5535816 ETHYL
 84162 ISOPROPYL
 131 AMILORIDE
 L3 0 ETHYL ISOPROPYL AMILORIDE
 (ETHYL (W) ISOPROPYL (W) AMILORIDE)

=> s isopropyl ethyl amiloride
 84162 ISOPROPYL
 5535816 ETHYL
 131 AMILORIDE
 L4 0 ISOPROPYL ETHYL AMILORIDE
 (ISOPROPYL (W) ETHYL (W) AMILORIDE)

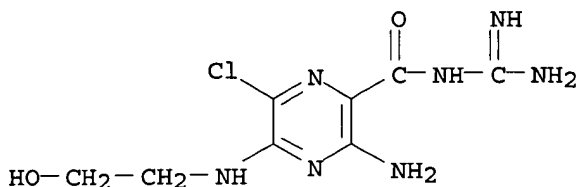
=> s amiloride
 L5 131 AMILORIDE

=> s ethyl amiloride
 5535816 ETHYL
 131 AMILORIDE
 L6 4 ETHYL AMILORIDE
 (ETHYL (W) AMILORIDE)

=> d 16 1-4

L6 ANSWER 1 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN

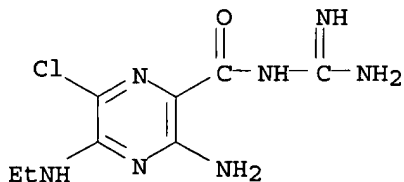
RN 67879-54-3 REGISTRY
 CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-[(2-hydroxyethyl)amino]- (9CI) (CA INDEX NAME)
 OTHER NAMES:
 CN 5-[N-(2-Hydroxyethyl)]amiloride
 FS 3D CONCORD
 MF C8 H12 Cl N7 O2
 CI COM
 LC STN Files: BEILSTEIN*, CA, CAPLUS
 (*File contains numerically searchable property data)



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

2 REFERENCES IN FILE CA (1947 TO DATE)
 2 REFERENCES IN FILE CAPLUS (1947 TO DATE)

L6 ANSWER 2 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN
 RN 2235-96-3 REGISTRY
 CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-(ethylamino)- (9CI) (CA INDEX NAME)
 OTHER CA INDEX NAMES:
 CN Pyrazinecarboxamide, N-amidino-3-amino-6-chloro-5-(ethylamino)- (7CI, 8CI)
 OTHER NAMES:
 CN 5-(N-Ethyl)amiloride
 FS 3D CONCORD
 MF C8 H12 Cl N7 O
 LC STN Files: BEILSTEIN*, CA, CAOLD, CAPLUS, IFICDB, IFIPAT, IFIUDB, SPECINFO
 (*File contains numerically searchable property data)

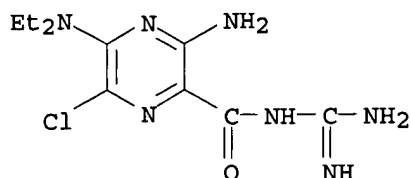


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11 REFERENCES IN FILE CA (1947 TO DATE)
 11 REFERENCES IN FILE CAPLUS (1947 TO DATE)
 1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

L6 ANSWER 3 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN
 RN 2086-31-9 REGISTRY
 CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-(diethylamino)- (9CI) (CA INDEX NAME)
 OTHER CA INDEX NAMES:
 CN Pyrazinecarboxamide, N-amidino-3-amino-6-chloro-5-(diethylamino)- (7CI, 8CI)
 OTHER NAMES:
 CN 5-(N,N-Diethyl)amiloride
 FS 3D CONCORD
 MF C10 H16 Cl N7 O

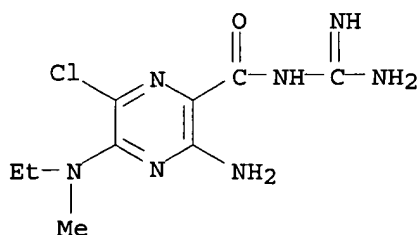
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LC STN Files: BEILSTEIN*, CA, CANCERLIT, CAOLD, CAPLUS, IFICDB, IFIPAT,
IFIUDB, IPA, MEDLINE
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PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

12 REFERENCES IN FILE CA (1947 TO DATE)
12 REFERENCES IN FILE CAPLUS (1947 TO DATE)
1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

L6 ANSWER 4 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN
RN 1148-33-0 REGISTRY
CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-(ethylmethylamino)- (9CI) (CA INDEX NAME)
OTHER CA INDEX NAMES:
CN Pyrazinecarboxamide, N-amidino-3-amino-6-chloro-5-(ethylmethylamino)- (7CI, 8CI)
OTHER NAMES:
CN **5-(N-Methyl-N-ethyl)amiloride**
FS 3D CONCORD
MF C9 H14 Cl N7 O
CI COM
LC STN Files: BEILSTEIN*, CA, CAOLD, CAPLUS, IFICDB, IFIPAT, IFIUDB
(*File contains numerically searchable property data)



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

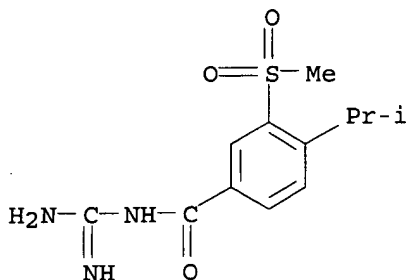
17 REFERENCES IN FILE CA (1947 TO DATE)
17 REFERENCES IN FILE CAPLUS (1947 TO DATE)
1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

=> s cariporide/cn
L7 1 CARIPORIDE/CN

=> d 17

L7 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2003 ACS on STN
RN 159138-80-4 REGISTRY
CN Benzamide, N-(aminoiminomethyl)-4-(1-methylethyl)-3-(methylsulfonyl)- (9CI) (CA INDEX NAME)
OTHER NAMES:
CN **Cariporide**
FS 3D CONCORD
MF C12 H17 N3 O3 S
CI COM

SR CA
 LC STN Files: ADISINSIGHT, ADISNEWS, BIOBUSINESS, BIOSIS, BIOTECHNO, CA,
 CAPLUS, CBNB, CIN, DDFU, DRUGNL, DRUGPAT, DRUGU, DRUGUPDATES, EMBASE,
 IPA, MRCK*, PHAR, PROMT, SYNTHLINE, TOXCENTER, USAN, USPAT2, USPATFULL
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PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

90 REFERENCES IN FILE CA (1947 TO DATE)
 92 REFERENCES IN FILE CAPLUS (1947 TO DATE)

=> file medicine

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	SINCE FILE ENTRY	TOTAL SESSION
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CA INDEXING COPYRIGHT (C) 2003 AMERICAN CHEMICAL SOCIETY (ACS)

=>

=> d his

(FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)

FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003

L1	1 S TIMOLOL/CN
L2	1 S AMILORIDE/CN
L3	0 S ETHYL ISOPROPYL AMILORIDE
L4	0 S ISOPROPYL ETHYL AMILORIDE
L5	131 S AMILORIDE
L6	4 S ETHYL AMILORIDE
L7	1 S CARIPORIDE/CN

FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN,
DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE,
ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE,
NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON
27 JUL 2003

=> s l1 or timolol

'CN' IS NOT A VALID FIELD CODE
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27 FILES SEARCHED...
'CN' IS NOT A VALID FIELD CODE
'CN' IS NOT A VALID FIELD CODE
'CN' IS NOT A VALID FIELD CODE
L8 31558 L1 OR TIMOLOL

=> s l2 or amiloride

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33 FILES SEARCHED...
L9 64288 L2 OR AMILORIDE

=> s l7 or acriporide

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L10 507 L7 OR ACRIPORIDE

=> s l7 or cariporide

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13 FILES SEARCHED...
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26 FILES SEARCHED...
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L11 1505 L7 OR CARIPORIDE

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(FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)

FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003

L1 1 S TIMOLOL/CN
L2 1 S AMILORIDE/CN
L3 0 S ETHYL ISOPROPYL AMILORIDE
L4 0 S ISOPROPYL ETHYL AMILORIDE
L5 131 S AMILORIDE
L6 4 S ETHYL AMILORIDE
L7 1 S CARIPORIDE/CN

FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN, DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE, ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE, NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON 27 JUL 2003

L8 31558 S L1 OR TIMOLOL
L9 64288 S L2 OR AMILORIDE
L10 507 S L7 OR ACRIPORIDE
L11 1505 S L7 OR CARIPORIDE

=> s l8 or l9 or l11

L12 95722 L8 OR L9 OR L11

=> s glaucoma

L13 159500 GLAUCOMA

=> s aqueous humor

L14 34931 AQUEOUS HUMOR

=> s antiport (s) modulat?

23 FILES SEARCHED...
L15 0 S ANTIPOORT (S) MODULAT?

=> s antiport (s) modulat?

L16 457 ANTIPOORT (S) MODULAT?

=> s antiport? (s) modulat?

L17 923 ANTIPOORT? (S) MODULAT?

=> s l12 and l13
L18 9965 L12 AND L13

=> s l18 and l17
L19 13 L18 AND L17

=> dup rem
ENTER L# LIST OR (END):l19
DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGLAUNCH,
DRUGMONOG2, KOSMET, MEDICONF, NUTRACEUT, PCTGEN, PHARMAML'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L19
L20 10 DUP REM L19 (3 DUPLICATES REMOVED)

=> d l20 1-10 ibib, kwic

L20 ANSWER 1 OF 10 CAPLUS COPYRIGHT 2003 ACS on STN DUPLICATE 1
ACCESSION NUMBER: 2003:334635 CAPLUS
DOCUMENT NUMBER: 138:331729
TITLE: Novel combination therapy to treat **glaucoma**
INVENTOR(S): Civan, Mortimer M.; Jacobson, Kenneth A.; MacKnight,
Anthony D. C.; Mitchell, Claire H.; Stone, Richard A.
PATENT ASSIGNEE(S): USA
SOURCE: U.S. Pat. Appl. Publ., 19 pp., Cont.-in-part of U. S.
Ser. No. 9,581.
CODEN: USXXCO
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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US 2003083227	A1	20030501	US 2002-217755	20020813
PRIORITY APPLN. INFO.:			US 1999-133180P P	19990507
			US 2001-312036P P	20010813
			US 2002-9581 A2	20020430
TI	Novel combination therapy to treat glaucoma			
ST	glaucoma treatment modulation aq humor secretion; biol transport modulation aq humor glaucoma ; sodium hydrogen exchanger inhibition glaucoma treatment; chloride channel inhibition aq humor formation; bumetanide dimethylamiloride dorzolamide intraocular pressure redn			
IT	Purinoceptor antagonists (A3; combination therapy to treat glaucoma by controlling secretion of excess fluids into aq. humor)			
IT	Adenosine receptors RL: BSU (Biological study, unclassified); BIOL (Biological study) (A3, lower intraocular pressure in mice lacking gene for; combination therapy to treat glaucoma by controlling secretion of excess fluids into aq. humor)			
IT	Biological transport (antiport , modulator of; combination therapy to treat glaucoma by controlling secretion of excess fluids into aq. humor)			
IT	Eye (aq. humor; combination therapy to treat glaucoma by controlling secretion of excess fluids into aq. humor)			
IT	Transport proteins RL: BSU (Biological study, unclassified); BIOL (Biological study) (bicarbonate-chloride-exchanging, AE2, modulator of; combination therapy to treat glaucoma by controlling secretion of excess fluids into aq. humor)			
IT	Transport proteins RL: BSU (Biological study, unclassified); BIOL (Biological study) (bicarbonate-chloride-exchanging, modulator of; combination therapy to treat glaucoma by controlling secretion of excess fluids into aq. humor)			

IT Transport proteins
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (chloride-potassium-sodium cotransporter, modulator of; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Ion channel blockers
 (chloride; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Eye
 (ciliary epithelium; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Antiglaucoma agents
Glaucoma (disease)
 Mouse
 (combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Biological transport
 (cotransport, modulator of; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Gene, animal
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (for A3 adenosine receptor, lower intraocular pressure in mice lacking; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Transport proteins
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (hydrogen ion-sodium-exchanging, NHE-1, modulator of; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Transport proteins
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (hydrogen ion-sodium-exchanging, modulator of; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Eye
 (intraocular fluid; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT Drug interactions
 (synergistic; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT 120279-96-1, Dorzolamide
 RL: BSU (Biological study, unclassified); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (carbonic anhydrase inhibitor; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT 53005-05-3, 4,4'-Diisothiocyanatostilbene-2,2'-disulfonic acid
 RL: BSU (Biological study, unclassified); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (chloride-bicarbonate-exchanger blocker; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT 28395-03-1, Bumetanide
 RL: BSU (Biological study, unclassified); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (chloride-potassium-sodium cotransporter blocker; combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT 2609-46-3, Amiloride
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT 59-66-5, Acetazolamide
 RL: BSU (Biological study, unclassified); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (combination therapy to treat **glaucoma** by controlling secretion of excess fluids into aq. humor)

IT 9001-03-0, Carbonic anhydrase

RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
 THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (inhibitor; combination therapy to treat **glaucoma** by
 controlling secretion of excess fluids into aq. humor)
 IT 1154-25-2 1214-79-5, Dimethylamiloride 517874-58-7, BIIB 723
 RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
 THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (sodium-hydrogen ion antiport blocker; combination therapy to treat
glaucoma by controlling secretion of excess fluids into aq.
 humor)

L20 ANSWER 2 OF 10 USPATFULL DUPLICATE on STN2

ACCESSION NUMBER: 2003:3060 USPATFULL
 TITLE: Anti-angiogenic compositions and methods of use
 INVENTOR(S): Hunter, William L., Vancouver, CANADA
 Machan, Lindsay S., Vancouver, CANADA
 Arsenault, A. Larry, Paris, CANADA

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 2003003094	A1	20030102
	US 6544544	B2	20030408
APPLICATION INFO.:	US 2001-925220	A1	20010808 (9)
RELATED APPLN. INFO.:	Continuation of Ser. No. US 1999-294458, filed on 19 Apr 1999, PENDING Continuation of Ser. No. US 1995-480260, filed on 7 Jun 1995, ABANDONED Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED Continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, ABANDONED		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	APPLICATION	
LEGAL REPRESENTATIVE:	SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH AVE, SUITE 6300, SEATTLE, WA, 98104-7092	
NUMBER OF CLAIMS:	9	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	75 Drawing Page(s)	
LINE COUNT:	5049	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II
 receptor antagonists and receptor antagonists for histamine, serotonin,
 endothelin; inhibitors of the sodium/hydrogen **antiporter**
 (e.g., **amiloride** and its derivatives); agents that
modulate intracellular Ca.sup.2+ transport such as L-type (e.g.,
 diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers
 (e.g., **amiloride**), calmodulin antagonists (e.g., H7) and
 inhibitors of the sodium/calcium **antiporter** (e.g.,
amiloride); ap-1 inhibitors (for tyrosine kinases, protein
 kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase 11,
 casein kinase II); anti-depressants (e.g.. . .

DETD . . . above, the present invention also provides methods for treating
 neovascular diseases of the eye, including for example, corneal
 neovascularization, neovascular **glaucoma**, proliferative
 diabetic retinopathy, retrolental fibroblasia and macular degeneration.

DETD [0232] Within another aspect of the present invention, methods are
 provided for treating neovascular **glaucoma**, comprising the
 step of administering to a patient a therapeutically effective amount of
 an anti-angiogenic composition to the eye, such. . .

DETD [0233] Briefly, neovascular **glaucoma** is a pathological
 condition wherein new capillaries develop in the iris of the eye. The
 angiogenesis usually originates from vessels. . .

DETD [0234] Neovascular **glaucoma** generally occurs as a complication
 of diseases in which retinal ischemia is predominant. In particular,
 about one third of the. . . with this disorder have diabetic
 retinopathy and 28% have central retinal vein occlusion. Other causes
 include chronic retinal detachment, end-stage **glaucoma**,

carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular **glaucoma** may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD [0238] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally, . . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute **glaucoma**, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

L20 ANSWER 3 OF 10 USPATFULL on STN

ACCESSION NUMBER: 2003:4168 USPATFULL

TITLE: Anti-angiogenic compositions and methods of use

INVENTOR(S): Hunter, William L., Vancouver, CANADA

Machan, Lindsay S., Vancouver, CANADA

Arsenault, A. Larry, Paris, CANADA

PATENT ASSIGNEE(S): Angiotech Pharmaceuticals, Inc., Vancouver, BC, CANADA, V6T 1Z4 (non-U.S. corporation)

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 2003004209	A1	20030102
APPLICATION INFO.:	US 2002-112921	A1	20020328 (10)
RELATED APPLN. INFO.:	Continuation of Ser. No. US 1998-13765, filed on 27 Jan 1998, ABANDONED Continuation of Ser. No. US 1995-478914, filed on 7 Jun 1995, GRANTED, Pat. No. US 5994341 Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED Continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, ABANDONED		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	APPLICATION	
LEGAL REPRESENTATIVE:	SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH AVE, SUITE 6300, SEATTLE, WA, 98104-7092	
NUMBER OF CLAIMS:	61	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	76 Drawing Page(s)	
LINE COUNT:	5230	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen **antiporter** (e.g., **amiloride** and its derivatives); agents that **modulate** intracellular Ca.sup.2+transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+channel blockers (e.g., **amiloride**), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium **antiporter** (e.g., **amiloride**); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase II, casein kinase II); anti-depressants (e.g. . . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative

diabetic retinopathy, retrolental fibroplasia and macular degeneration.

DETD reduce inflammation resulting from the injection itself Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . . .

DETD [0194] Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . . .

DETD [0195] Neovascular **glaucoma** generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage **glaucoma**, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular **glaucoma** may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . . .

DETD anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD [0199] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . . .

DETD a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute **glaucoma**, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . . .

DETD the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

L20 ANSWER 4 OF 10 USPATFULL DUPLICATE on STN3

ACCESSION NUMBER: 2002:294335 USPATFULL
 TITLE: ANTI-ANGIOGENIC COMPOSITIONS AND METHODS OF USE
 INVENTOR(S): HUNTER, WILLIAM L, BRITISH COLUMBIA, CANADA
 MACHAN, LINDSAY S, BRITISH COLUMBIA, CANADA
 ARSENAULT, A LARRY, ONTARIO, CANADA

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 2002164377	A1	20021107
	US 6506411	B2	20030114
APPLICATION INFO.:	US 1999-294458	A1	19990419 (9)
RELATED APPLN. INFO.:	Continuation of Ser. No. US 1995-480260, filed on 7 Jun 1995, ABANDONED Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED Division of Ser. No. US 1993-94536, filed on 19 Jul 1993, ABANDONED		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	APPLICATION	
LEGAL REPRESENTATIVE:	SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH AVE, SUITE 6300, SEATTLE, WA, 98104-7092	
NUMBER OF CLAIMS:	61	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	82 Drawing Page(s)	
LINE COUNT:	5243	
CAS INDEXING IS AVAILABLE FOR THIS PATENT.		
DETD for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter	

(e.g., **amiloride** and its derivatives); agents that **modulate** intracellular Ca.sup.2- transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., **amiloride**). calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium **antiporter** (e.g., **amiloride**); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase II, casein kinase II); anti-depressants (e.g.. . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative diabetic retinopathy, retrolental fibroplasia and macular degeneration.

DETD [0233] Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD [0234] Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates, from vessels. . .

DETD [0235] Neovascular **glaucoma** Generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage **glaucoma**, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular **glaucoma** may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD [0239] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute **glaucoma**, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition

L20 ANSWER 5 OF 10 USPATFULL on STN

ACCESSION NUMBER: 2002:295216 USPATFULL

TITLE: ANTI-ANGIOGENIC COMPOSITIONS AND METHODS OF USE

INVENTOR(S): HUNTER, WILLIAM L., VANCOUVER, CANADA

MACHAN, LINDSAY S., VANCOUVER, CANADA

ARSENAULT, A. LARRY, PARIS ON, CANADA

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 2002165265	A1	20021107
APPLICATION INFO.:	US 1997-984258	A1	19971203 (8)
RELATED APPLN. INFO.:	Continuation of Ser. No. US 1995-478203, filed on 7 Jun 1995, GRANTED, Pat. No. US 5716981 Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED		
	Continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, ABANDONED		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	APPLICATION	

LEGAL REPRESENTATIVE: SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH
AVE, SUITE 6300, SEATTLE, WA, 98104-7092

NUMBER OF CLAIMS: 61
EXEMPLARY CLAIM: 1
NUMBER OF DRAWINGS: 82 Drawing Page(s)
LINE COUNT: 5231

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II
receptor antagonists and receptor antagonists for histamine. serotonin,
endothelin; inhibitors of the sodium/hydrogen **antiporter**
(e.g., **amiloride** and its derivatives); agents that
modulate intracellular Ca.sup.2+ transport such as L-type (e.g.
diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers
(e.g., **amiloride**), calmodulin antagonists (e.g., H.sub.7) and
inhibitors of the sodium/calcium **antiporter** (e.g.,
amiloride); ap-1 inhibitors (for tyrosine kinases, protein
kinase C. myosin light chain kinase. Ca.sup.2+/calmodulin kinase II,
casein kinase II); anti-depressants (e.g.. . .

DETD . . . above, the present invention also provides methods for treating
neovascular diseases of the eye, including for example, corneal
neovascularization, neovascular **glaucoma**, proliferative
diabetic retinopathy, retrolental fibroblasia and macular degeneration.

DETD [0194] Within another aspect of the present invention, methods are
provided for treating neovascular **glaucoma**, comprising the
step of administering to a patient a therapeutically effective amount of
an anti-angiogenic composition to the eye, such. . .

DETD [0195] Briefly, neovascular **glaucoma** is a pathological
condition wherein new capillaries develop in the iris of the eye. The
angiogenesis usually originates from vessels. . .

DETD [0196] Neovascular **glaucoma** generally occurs as a complication
of diseases in which retinal ischemia is predominant. In particular,
about one third of the. . . with this disorder have diabetic
retinopathy and 28% have central retinal vein occlusion. Other causes
include chronic retinal detachment, end-stage **glaucoma**,
carotid artery obstructive disease, retrolental fibroplasia, sickle-cell
anemia. intraocular tumors, and carotid cavernous fistulas. In its early
stages, neovascular **glaucoma** may be diagnosed by high
magnification slitlamp biomicroscopy, where it reveals small, dilated,
disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be
administered topically to the eye in order to treat early forms of
neovascular **glaucoma**.

DETD [0200] Briefly, the pathology of diabetic retinopathy is thought to be
similar to that described above for neovascular **glaucoma**. In
particular, background diabetic retinopathy is believed to convert to
proliferative diabetic retinopathy under the influence of retinal
hypoxia. Generally,. . .

DETD . . . a decrease in peripheral vision of up to 50% of patients,
mechanical abrasions of the cornea, laser-induced cataract formation,
acute **glaucoma**, and stimulation of subretinal neovascular
growth (which can result in loss of vision). As a result, this procedure
is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage
and/or retinal detachment which can lead to blindness. Neovascular
angle-closure **glaucoma** is also a complication of this
condition

L20 ANSWER 6 OF 10 USPATFULL on STN

ACCESSION NUMBER: 2002:221067 USPATFULL
TITLE: Anti-angiogenic compositions and methods of use
INVENTOR(S): Hunter, William L., Vancouver, CANADA
Machan, Lindsay S., Vancouver, CANADA
Arsenault, A. Larry, Paris, CANADA
Burt, Helen M., Vancouver, CANADA
Jackson, John K., Vancouver, CANADA
Dordunoo, Stephen K., Vancouver, CANADA

NUMBER KIND DATE

PATENT INFORMATION: US 2002119202 A1 20020829
APPLICATION INFO.: US 2001-927882 A1 20010809 (9)
RELATED APPLN. INFO.: Continuation of Ser. No. US 1999-294458, filed on 19
Apr 1999, PENDING Continuation of Ser. No. US
1995-480260, filed on 7 Jun 1995, ABANDONED Division of
Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED
Division of Ser. No. US 1993-94536, filed on 19 Jul
1993, ABANDONED

	NUMBER	DATE
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PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	APPLICATION	
LEGAL REPRESENTATIVE:	SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH AVE, SUITE 6300, SEATTLE, WA, 98104-7092	
NUMBER OF CLAIMS:	11	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	75 Drawing Page(s)	
LINE COUNT:	5037	
CAS INDEXING IS AVAILABLE FOR THIS PATENT.		
DETD	. . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase II, casein kinase II); anti-depressants (e.g. . . .	
DETD	. . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular glaucoma , proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration.	
DETD	[0197] Within another aspect of the present invention, methods are provided for treating neovascular glaucoma , comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .	
DETD	[0198] Briefly, neovascular glaucoma is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .	
DETD	[0199] Neovascular glaucoma generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma , carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .	
DETD	. . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular glaucoma .	
DETD	[0203] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular glaucoma . In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . .	
DETD	. . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma , and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .	
DETD	. . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this	

condition.

L20 ANSWER 7 OF 10 CAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER: 2000:814312 CAPLUS

DOCUMENT NUMBER: 133:344642

TITLE: Methods using **antiport modulators**
for controlling intraocular pressure

INVENTOR(S): Civan, Mortimer M.; MacKnight, Anthony D.

PATENT ASSIGNEE(S): The Trustees of the University of Pennsylvania, USA

SOURCE: PCT Int. Appl., 65 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000067756	A1	20001116	WO 2000-US12551	20000508

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR,
CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU,
ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU,
LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE,
SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA,
ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM

RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE,
DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: US 1999-133180P P 19990507

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Methods using **antiport modulators** for controlling
intraocular pressure

ST intraocular pressure **glaucoma** treatment **antiport**
modulator; sodium proton exchanger modulation intraocular
pressure; chloride bicarbonate exchanger modulation intraocular pressure

IT Proteins, specific or class
RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
(Biological study); PROC (Process)
(A2 **antiport**; **antiport modulators** for
controlling intraocular pressure)

IT Adenosine receptors
RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
(Biological study); PROC (Process)
(A3; **antiport modulators** for controlling
intraocular pressure)

IT Proteins, specific or class
RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
(Biological study); PROC (Process)
(NHE-1 **antiport**; **antiport modulators** for
controlling intraocular pressure)

IT Antiglaucoma agents
Secretion (process)
pH
(**antiport modulators** for controlling intraocular
pressure)

IT Biological transport
(**antiport**, chloride-bicarbonate; **antiport**
modulators for controlling intraocular pressure)

IT Eye
(aq. humor; **antiport modulators** for controlling
intraocular pressure)

IT Ion channel blockers
(chloride; **antiport modulators** for controlling
intraocular pressure)

IT Eye
(ciliary epithelium, nonpigmented; **antiport**
modulators for controlling intraocular pressure)

IT Eye

(ciliary epithelium, pigmented; **antiport modulators** for controlling intraocular pressure)

IT Eye

(ciliary epithelium; **antiport modulators** for controlling intraocular pressure)

IT Drug delivery systems

(ophthalmic; **antiport modulators** for controlling intraocular pressure)

IT Biological transport

(sodium-hydrogen **antiport**; **antiport modulators** for controlling intraocular pressure)

IT Adrenoceptor antagonists

(.beta.-; **antiport modulators** for controlling intraocular pressure)

IT 56-84-8, L-Aspartic acid, biological studies 59-66-5, Acetazolamide

60-92-4, Cyclic AMP 28395-03-1, Bumetanide 53005-05-3, DIDS

149725-40-6, HOE694 152918-18-8, IB-MECA

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); BIOL (Biological study)

(**antiport modulators** for controlling intraocular pressure)

IT 100-88-9, Cyclamate 1154-25-2 1214-79-5, Dimethylamiloride

2609-46-3, Amiloride 2609-46-3D,

Amiloride, analogs 26839-75-8, Timolol

159138-80-4, Cariporide

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(**antiport modulators** for controlling intraocular pressure)

IT 71-52-3, Bicarbonate, biological studies 7440-09-7, Potassium,

biological studies 7440-23-5, Sodium, biological studies 12408-02-5,

Hydrogen ion, biological studies 16887-00-6, Chloride, biological studies

RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process)

(**antiport modulators** for controlling intraocular pressure)

L20 ANSWER 8 OF 10 USPATFULL on STN

ACCESSION NUMBER: 1999:155724 USPATFULL

TITLE: Anti-angiogenic Compositions and methods for the treatment of arthritis

INVENTOR(S): Hunter, William L., Vancouver, Canada

Machan, Lindsay S., Vancouver, Canada

Arsenault, A. Larry, Paris, Canada

PATENT ASSIGNEE(S): Angiogenesis Technologies, Inc., Vancouver, Canada (non-U.S. corporation)

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 5994341		19991130
APPLICATION INFO.:	US 1995-478914		19950607 (8)
RELATED APPLN. INFO.:	Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, now abandoned which is a continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, now abandoned		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	Granted	
PRIMARY EXAMINER:	Kumar, Shailendra	
LEGAL REPRESENTATIVE:	Seed & Berry LLP	
NUMBER OF CLAIMS:	8	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	129 Drawing Figure(s); 75 Drawing Page(s)	
LINE COUNT:	5044	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen **antiporter** (e.g., **amiloride** and its derivatives); agents that **modulate** intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., **amiloride**), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium **antiporter** (e.g., **amiloride**); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+ /calmodulin kinase II, casein kinase II); anti-depressants. . . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative diabetic retinopathy, retrolental fibroplasia and macular degeneration.

DETD Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . . .

DETD Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . . .

DETD Neovascular **glaucoma** generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the . . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage **glaucoma**, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular **glaucoma** may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute **glaucoma**, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

L20 ANSWER 9 OF 10 USPATFULL on STN

ACCESSION NUMBER: 1999:37140 USPATFULL
TITLE: Anti-angiogenic compositions and methods of use
INVENTOR(S): Hunter, William L., Vancouver, Canada
Machan, Lindsay S., Vancouver, Canada
Arsenault, A. Larry, Paris, Canada
PATENT ASSIGNEE(S): Angiotech Pharmaceuticals Inc., Vancouver, Canada
(non-U.S. corporation)

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 5886026		19990323
APPLICATION INFO.:	US 1995-472413		19950607 (8)
RELATED APPLN. INFO.:	Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, now abandoned which is a continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, now abandoned		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	Granted	
PRIMARY EXAMINER:	Kumar, Shailendra	
LEGAL REPRESENTATIVE:	Seed and Berry LLP	
NUMBER OF CLAIMS:	6	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	130 Drawing Figure(s); 75 Drawing Page(s)	
LINE COUNT:	4997	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen **antiporter** (e.g., **amiloride** and its derivatives); agents that **modulate** intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., **amiloride**), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium **antiporter** (e.g., **amiloride**); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+ /calmodulin kinase II, casein kinase II); anti-depressants. . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative diabetic retinopathy, retrolental fibroplasia and macular degeneration.

DETD Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .

DETD Neovascular **glaucoma** generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the . . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage **glaucoma**, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular **glaucoma** may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute **glaucoma**, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

L20 ANSWER 10 OF 10 USPATFULL on STN

ACCESSION NUMBER: 1998:14828 USPATFULL

TITLE: Anti-angiogenic compositions and methods of use

INVENTOR(S): Hunter, William L., Vancouver, Canada

Machan, Lindsay S., Vancouver, Canada

Arsenault, A. Larry, Paris, Canada

PATENT ASSIGNEE(S): Angiogenesis Technologies, Inc., Vancouver, Canada

(non-U.S. corporation)

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 5716981		19980210
APPLICATION INFO.:	US 1995-478203		19950607 (8)
RELATED APPLN. INFO.:	Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, now abandoned which is a continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, now abandoned		

	NUMBER	DATE
PRIORITY INFORMATION:	WO 1994-CA373	19940719
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	Granted	
PRIMARY EXAMINER:	Kumar, Shailendra	
LEGAL REPRESENTATIVE:	Seed and Berry LLP	
NUMBER OF CLAIMS:	18	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	130 Drawing Figure(s); 75 Drawing Page(s)	
LINE COUNT:	5084	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen **antiporter** (e.g., **amiloride** and its derivatives); agents that **modulate** intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., **amiloride**), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium **antiporter** (e.g., **amiloride**); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+ /calmodulin kinase II, casein kinase II); anti-depressants. . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative diabetic retinopathy, retrolental fibroplasia and macular degeneration.

DETD Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .

DETD Neovascular **glaucoma** generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage **glaucoma**, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular **glaucoma** may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute **glaucoma**, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage

and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

=> d his

(FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)

FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003

L1 1 S TIMOLOL/CN
L2 1 S AMILORIDE/CN
L3 0 S ETHYL ISOPROPYL AMILORIDE
L4 0 S ISOPROPYL ETHYL AMILORIDE
L5 131 S AMILORIDE
L6 4 S ETHYL AMILORIDE
L7 1 S CARIPORIDE/CN

FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN, DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE, ESBIODBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE, NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON 27 JUL 2003

L8 31558 S L1 OR TIMOLOL
L9 64288 S L2 OR AMILORIDE
L10 507 S L7 OR ACRIPORIDE
L11 1505 S L7 OR CARIPORIDE
L12 95722 S L8 OR L9 OR L11
L13 159500 S GLAUCOMA
L14 34931 S AQUEOUS HUMOR
L15 0 S S ANTIPTORT (S) MODULAT?
L16 457 S ANTIPTORT (S) MODULAT?
L17 923 S ANTIPTORT? (S) MODULAT?
L18 9965 S L12 AND L13
L19 13 S L18 AND L17
L20 10 DUP REM L19 (3 DUPLICATES REMOVED)

=> s intraocular pressure

29 FILES SEARCHED...

L21 82563 INTRAOCULAR PRESSURE

=> s l18 and l21

L22 5371 L18 AND L21

=> s l14 and l22

L23 730 L14 AND L22

=> s sodium proton (s) exchange

33 FILES SEARCHED...

L24 3138 SODIUM PROTON (S) EXCHANGE

=> s l24 and l23

L25 0 L24 AND L23

=> s ae-2 antiptort

21 FILES SEARCHED...

L26 0 AE-2 ANTIPTORT

=> s nhe-1 antiptort

26 FILES SEARCHED...

L27 3 NHE-1 ANTIPTORT

=> s nhe antiptort

L28 3 NHE ANTIPTORT

=> s nhe (s) antiptort

75% OF LIMIT FOR L#S REACHED

L29 206 NHE (S) ANTIPOINT

=> s ae2 (s) antiport
L30 30 AE2 (S) ANTIPOINT

=> s l29 and l30
L31 4 L29 AND L30

=> s l31 and l23
L32 1 L31 AND L23

=> s l29 or l30
L33 232 L29 OR L30

=> s l23 and l33
L34 1 L23 AND L33

=> d l34 ibib, kwic

L34 ANSWER 1 OF 1 USPATFULL on STN

ACCESSION NUMBER: 2003:120743 USPATFULL

TITLE: Novel combination therapy to treat **glaucoma**

INVENTOR(S): Civan, Mortimer M., Wynnewood, PA, UNITED STATES
Jacobson, Kenneth A., Silver Spring, MD, UNITED STATES
MacKnight, Anthony D.C., Dunedin, NEW ZEALAND
Mitchell, Claire H., Philadelphia, PA, UNITED STATES
Stone, Richard A., Havertown, PA, UNITED STATES

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 2003083227	A1	20030501
APPLICATION INFO.:	US 2002-217755	A1	20020813 (10)
RELATED APPLN. INFO.:	Continuation-in-part of Ser. No. US 2002-9581, filed on 30 Apr 2002, PENDING		

	NUMBER	DATE
PRIORITY INFORMATION:	US 1999-133180P	19990507 (60)
	US 2001-312036P	20010813 (60)
DOCUMENT TYPE:	Utility	
FILE SEGMENT:	APPLICATION	
LEGAL REPRESENTATIVE:	Evelyn H. McConathy, Esquire, Dilworth Paxson LLP, 3200 Mellon Bank Center, 1735 Market Street, Philadelphia, PA, 19103	
NUMBER OF CLAIMS:	31	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	6 Drawing Page(s)	
LINE COUNT:	1250	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

TI Novel combination therapy to treat **glaucoma**

AB Provided is a method for modulating, controlling or regulating **intraocular pressure** and secretion of the **aqueous humor** of the eye, in particular for treating or reducing elevated **intraocular pressure** or secretion, e.g., related to glaucomas. Selected combined drug therapy effectively and synergistically modulates **intraocular pressure** by either (1) double-blocking the uptake step, wherein both transporters in the first (entry step) of **aqueous humor** formation are blocked or inhibited; or (2) blocking the entry and exit steps, wherein the sodium-hydrogen (Na.sup.+/H.sup.+) exchanger underlying the. . . inhibited, and also lowering or reducing the activity of the chloride (Cl.sup.-) channels involved in the second (exit) step of **aqueous humor** formation. By combining the selected drugs or compounds to produce a combined or synergistic modulating effect, control of IOP is. . .

SUMM . . . The present invention relates to the field of ophthalmology. In particular, the invention relates to the prevention and treatment of **glaucoma** and associated elevations of **intraocular**

pressure.

SUMM the world, currently affecting an estimated three million people in the United States, with 300,000 new cases diagnosed every year. **Glaucoma** results from obstructed outflow from the **aqueous humor** of the eye, resulting in elevated **intraocular pressure** in the anterior chamber, and visual loss attributed to progressive damage of the optic nerve, and consequent loss of retinal ganglion cells (Quigley et al., Invest. Ophthalmol. Vis. Sci. 19:505 (1980)). Increase of the **intraocular pressure** ("IOP") of the eye is the major, and best understood, risk factor for the appearance and progression of glaucomatous optic neuropathy. Elevated or increased **intraocular pressure** ("IOP") can also be caused by other conditions, such as impaired intraocular fluid transport caused by eye surgery, including surgery for **glaucoma**. The IOP, itself, reflects a balance between the rates of inflow (fluid formation) and outflow (fluid return) of the **aqueous humor** by re-absorption. Medical approaches to treating **glaucoma** are frequently directed at reducing the rate of net formation of **aqueous humor**.

SUMM [0005] The **aqueous humor** of the eye is formed by the ciliary epithelium, comprising two cell layers, whose apical membranes are juxtaposed. The outer. . . ciliary epithelial (PE) cells face the stroma, while the inner non-pigmented ciliary epithelial (NPE) cells are in contact with the **aqueous humor**. Secretion involves primary solute transfer, primarily NaCl, with accompanying water movement, from the blood or supporting stroma, across the basolateral membranes of the PE cells into the **aqueous humor** in the contralateral posterior chamber of the eye (Cole, Exp. Eye Res. 25(Suppl):161-176 (1977)). This provides an osmotic driving force. . . .

SUMM [0006] The secretion of **aqueous humor** into the eye results as a consequence of two opposing physiological processes: fluid secretion into the eye by the NPE. . . of the eye) by the PE cells. Thus, both release of chloride ions by the NPE cells into the adjacent **aqueous humor** enhance secretion, and chloride ion release by the PE cells into the neighboring stroma reduce net secretion (Civan, Current Topics. . . Membranes 45:1-24 (1998), Tripathi, In: The Eye, Chap. 3, pp 163-356, Davson & Graham (eds), Academic Press, New York, (1974)). **Intraocular pressure** reflects a balance between the rates of secretion and outflow of the **aqueous humor**.

SUMM factor governing the rate of secretion is the rate of chloride ion (Cl_{sup.-}) release from the NPE cells into the **aqueous humor** (Civan, News Physiol. Sci. 12:158-162 (1997)). Thus, the activity of the Cl_{sup.-} channels is a rate-limiting factor in **aqueous humor** secretion, given the low baseline level of channel activity and the predominance of the chloride anion in the transferred fluid. . . .

SUMM [0008] Structurally the mouse eye parallels the **aqueous humor** outflow pathways in the human and shows similar functional responses to drugs that inhibit **aqueous humor** inflow and facilitate outflow in the human. Thus, the mouse is a particularly suitable non-primate model for studying the genetic. . . control of physiological and pharmacological function. However, the anterior chamber of a mouse eye contains only about 2-4 .mu.l of **aqueous humor**, which until recently, complicated efforts to measure IOP in the mouse reliably.

SUMM [0010] FIG. 1 depicts a minimalist, and necessarily incomplete, consensus model of **aqueous humor** secretion from Avila et al., Invest. Ophthalmol. Vis. Sci. 43:1897-1902 (2002) (Carre et al., Curr. Eye Res. 11:609-624 (1992); Chu. . . et al., Exp. Eye. Res. 64:945-952 (1997)). "Inflow," the transfer of fluid from body side or "stromal side" into the **aqueous humor**, is presented as basically a 3-step process. First, as shown, water and salt, NaCl, is initially taken up from the. . . .

SUMM the PE cells diffuses across the gap junctions into the second cell layer [non-pigmented ciliary epithelial (NPE) cells] abutting the **aqueous humor** (Coca-Prados et al., Curr. Eye Res. 11:113-122 (1992); Edelman et al., 1994; Mitchell et al., FASEB J

11:A301 (1998); Oh. . . (1994); Raviola et al., Invest. Ophthalmol. Vis. Sci. 17:958-981 (1978); Walker et al., 1999; Wolosin et al., In: The Eye's **Aqueous Humor**: From Secretion to **Glaucoma**, Civan (ed), Academic Press, Boston, pp 135-162 (1998)).

SUMM [0012] Finally, the salts and fluids are released into the **aqueous humor** by the contiguous NPE cells through the Na.sup.+, K.sup.+ -activated ATPase exchange pump and Cl.sup.- channels (Jacob et al., Am. J. . . .

SUMM [0014] Current treatment methods to relieve **intraocular pressure** include forming small laser penetrations in the eye to release excess pressure (e.g., trabeculectomy), as well as the use of systemic and topical drugs for lowering **intraocular pressure**. At the present time, medical control of **intraocular pressure** and **glaucoma** consists of topical, oral or intravitreal administration of many compounds. See generally, Horlington, U.S. Pat. No. 4,425,346; Komuro et al., . . .

SUMM [0015] Among the most effective medical therapies for **glaucoma** are strategies aimed at reducing **intraocular pressure** by reducing the net rate of **aqueous humor** formation by the ocular ciliary epithelial bilayer (see generally, Shields, Textbook of **Glaucoma**, 3rd Ed., Williams & Wilkins, Baltimore (1992)). This can occur either by blocking unidirectional secretion from stroma to the **aqueous humor** or by stimulating flow in the opposite direction (Caprioli et al., Yale J. Biol. Med. 57:283-300 (1984); Civan et al., . . .

SUMM [0016] Four primary classes of drugs are used to treat **glaucoma**. These include: miotics (e.g., pilocarpine, carbachol and acetylcholinesterase inhibitors); sympathomimetics (e.g., epinephrine, metipranolol, dipivefrin, carbachol, dipivalyl, and parn-aminoclonidine); beta-blockers (e.g., betaxolol, levobunolol and **timolol**) and potent cholinesterase inhibitors (e.g., echothiophate); and carbonic anhydrase inhibitors (e.g., acetazolamide, methazolamide, dorzolamidet and ethoxzolamide). For example, miotics and sympathomimetics are believed to lower **intraocular pressure** by increasing the outflow of **aqueous humor**, while beta-blockers and carbonic anhydrase inhibitors are believed to operate by decreasing the formation of **aqueous humor** (Ritch et al., (1996) In: The Glaucomas (eds Ritch, Shields, Krupin) 2nd ed., pp. 1507-1519, Mosby, St. Louis). The non-selective, . . . topical, .beta.- and .beta..sub.1-adrenergic antagonists have proven to be useful for lowering the secretory rate of fluids in the eye (**aqueous humor** inflow), and thereby for controlling **intraocular pressure** (Gieser et al., (1996) In: The Glaucomas, supra, pp. 1425-1448). **Timolol** reportedly binds to .beta.-adrenergic receptors of the ciliary processes with high affinity (Vareilles et al., Invest. Ophthalmol. Vis. Sci. 16:987-996 (1977)), and is among the most widely used and effective drugs for lowering the **intraocular pressure** of glaucomatous patients (Gieser et al., 1996). Another new type of drug, precursor prostaglandin compounds (e.g., latanoprost), which enhance outflow. . . .

SUMM . . . Miotics tend to reduce the patient's visual acuity, particularly in the presence of lenticular opacities. Topical beta blockers, such as **timolol**, have been associated with side-effects such as fatigue, confusion, or asthma; while exacerbated cardiac symptoms have been reported after rapid. . . .

SUMM [0018] Accordingly, because of the insidious nature of glaucomas and other conditions affecting the **intraocular pressure** in the eye and the difficulties in treating them, there has been an on-going and long-felt need in the art for the development of methods for the safe and reliable prevention, control or treatment of elevated **intraocular pressure**, that can be utilized before significant damage to the optical nerve occurs. Also needed is the discovery of compositions or. . . .

SUMM [0019] Lower than normal **intraocular pressure** can also be problematic, caused for example, by a variety of conditions, such as surgery for **glaucoma**, retinal detachment, uveitis, and the like. However, since no drugs are presently available for the safe

and effective prevention, modulation or regulation of reduced **intraocular pressure** without adverse side-effects, there remains a need for the development of more effective treatment methods for surgically-induced low or depressed **intraocular pressure**, as well as elevated **intraocular pressure**.

SUMM [0020] The present invention, therefore, meets a particular need in the art by providing methods for preventing, modulating or regulating **intraocular pressure**, in particular for treating or reducing elevated **intraocular pressure**.

Specifically, the present invention provides combined therapeutic methods by which intraocular fluid pressure can be selectively and reversibly increased, decreased, . . . level, although primarily the invention will be useful to relieve or prevent elevated levels of intraocular fluid in, for example, **glaucoma** patients, before vision is adversely and permanently affected. In addition, the present combined therapeutic methods permit known compounds to be. . .

SUMM [0021] The present invention provides several methods for regulating, controlling or modulating **aqueous humor** secretion, comprising the step of administering to ciliary epithelial cells of the **aqueous humor**, an effective ("secretion-modulating") amount of more than one pharmaceutical compositions administered in combination (or sequentially, but in sufficiently close proximity. . . combined effect). Further provided is in vivo evidence that the combinations of drugs or therapeutic moieties effectively and synergistically lower **intraocular pressure** (IOP) by:

(1) double-blocking the uptake step, wherein both transporters in the first (entry step) of **aqueous humor** formation (the paired Na.sup.+ /H.sup.+ and Cl.sup.- /HCO.sub.3.sup.- antiports and the Na.sup.+ -K.sup.+ -2Cl.sup.- symport) are blocked or inhibited; or (2) blocking or inhibiting. . . and also the activity is lowered or reduced of the chloride (Cl.sup.-) channels involved in the second (exit) step of **aqueous humor** formation.

SUMM . . . in the patient, thereby modulating, preferably by blocking or inhibiting elevated IOP. In fact, when either the secretion into the **aqueous humor** cells is elevated, or the fluid pressure or **intraocular pressure** is elevated in a patient, the drugs in the combination therapy are administered in a combined amount, that is sufficient. . .

SUMM . . . to the cells in vitro or in vivo. The latter methods offer regulation, control or modulation of fluid pressure or **intraocular pressure** in an individual or subject.

DRWD [0026] FIG. 1 depicts a consensus model of **aqueous humor** formation and NaCl secretion by the ciliary epithelium. Carbonic anhydrase limited delivery of H.sup.+ and HCO.sub.3.sup.- limits uptake of stromal. . . through the Na.sup.+ -K.sup.+ -2Cl.sup.- symport. At the contralateral surface, Na⁺ and Cl⁻ can be released from the NPE cells into the **aqueous humor** through Na.sup.+ , K.sup.+ -activated ATPase and Cl.sup.- channels, respectively.

DETD [0031] The methods and compositions of the present invention are intended for treatment of **glaucoma** and other conditions, which manifest elevated **intraocular pressure** in the eye of a patient, particularly human patients, but also including other mammalian hosts. **Glaucoma** is a term which embraces a group of ocular diseases characterized by elevated **intraocular pressure** levels which can damage the eye, and destroy the optic nerve and related ganglia. In addition, normotensive **glaucoma** is characterized by an apparent nonelevated **intraocular pressure**. However, for the patient suffering from normotensive **glaucoma**, the apparently normal pressure is sufficiently high for that particular patient as to cause the same types of nerve and. . .

DETD [0032] Therefore, the glaucomas treated by the methods of the present invention are not limited exclusively to elevated **intraocular pressure**. Other conditions which result in elevated **intraocular pressure** levels include cataract surgery, steroid treatment, and treatment with other drugs known to cause **intraocular pressure**. The methods and compositions of the present invention are intended to treat all such conditions,

preferably to lower the **intraocular pressure** to a manageable and safe level. Moreover, the methods are also effective in the treatment of lower than normal **intraocular pressure** levels.

DETD . . . present invention provides in vivo evidence that combinations of drugs or therapeutic moieties (the "combined modulator") effectively and synergistically lower **intraocular pressure** (IOP) by either: (1) double-blocking of uptake step, wherein both transporters in the first (entry step) of **aqueous humor** formation are blocked or inhibited; or (2) blocking of the entry and exit steps, wherein the sodium-hydrogen (Na^+/H^+) exchanger underlying. . . and also the activity is lowered or reduced of the chloride (Cl^-) channels involved in the second (exit) step of **aqueous humor** formation. These discoveries, which are discussed in detail below, permit strategies to be developed to use drugs at very low, focussed concentrations for preventing, modulating or regulating **intraocular pressure**, most particularly for treating or reducing elevated **intraocular pressure**

DETD [0038] The basis for the first step in inflow into the **aqueous humor**, uptake of salt into the PE-cell layer, has been the subject of considerable controversy. Some investigators have reported that the. . .

DETD . . . in vitro (in cultured bovine PE cells and RNA preparations of human ciliary body) the molecular basis for the paired **antiport** activity of the **NHE-1** Na^+/H^+ exchanger, and the **AE2** $\text{Cl}^-/\text{HCO}_3^-$ exchanger. (Counillon et al., Pflugers Arch. (Eur. J. Physiol.) 440:667-678 (2000); Avila et al., 2001A). Because the **NHE-1** exchanger is highly sensitive to several blockers of the sodium/proton symport, it was possible to selectively block the exchangers specifically involved in **aqueous humor** inflow.

DETD . . . antiports provide the dominant entry pathway under physiological conditions, and further suggested that carbonic anhydrase inhibitors (commonly used to treat **glaucoma**) act by blocking Na^+/H^+ exchange. More recently an electron-probe X-ray microanalysis (McLaughlin et al., Am. J. Physiol. Cell Physiol. 281:C865-C875(2001)) further suggested that another very widely used antiglaucomatous drug (**timolol**) acts primarily in the same way, blocking Na^+/H^+ exchange.

DETD . . . Ophthamol. Vis. Sci. 38:1700-1707 (1997). However, in a preferred and exemplified embodiment of the invention, after applying a topical inhibitor (ethylisopropyl-**amiloride**) of Na^+/H^+ antiport exchange, the administration of 10 mM bumetanide reduced IOP by 4.0 ± 0.6 mm Hg (mean \pm SE, N=6, $P < 0.01$). By. . .

DETD [0043] The basis of the release step of solute and water into **aqueous humor** is generally via extrusion of Na^+ through the Na^+ , K^+ -activated ATPase and the release of Cl^- through the Cl^- channels. Agonists of A₃-subtype adenosine receptors have been found to activate the Cl^- channels of NPE cells. This action enhances **aqueous humor** inflow and raises IOP.

DETD . . . the present invention provides an alternative combinatorial drug approach for more effectively controlling IOP, wherein both the first step of **aqueous humor** formation (entry into the ciliary epithelium) and the release step of the chloride ions from the **aqueous humor** are simultaneously blocked. The advantage of this approach is that each of the two steps can be selectively targeted, thereby. . . two entry steps were blocked, the **NHE-1** exchanger can be selectively blocked, which is important in the first step of **aqueous humor** formation. However, it is also possible to block activation of the final step of **aqueous humor** formation by applying A₃-subtype adenosine-receptor antagonists. Therefore, by administering both classes of drugs together, the effect is highly advantageous (blocking or controlling both the first and the final steps of **aqueous humor** formation), resulting in an efficacious mechanism for modulating IOP that is also relatively free of side effects.

DETD . . . and it is desirable that such elevated pressures be lowered to below 18 mm Hg. In the case of low-tension **glaucoma**, it is desirable for the **intraocular pressure** to be lowered below that exhibited by the patient prior to treatment. **Intraocular pressure** can be measured by conventional tonometric techniques.

DETD [0047] The methods and compositions of the present invention are also intended for treatment of hypotonia and/or reduced **intraocular pressure** conditions of the eye. Reduced intraocular pressures are generally considered below about 8 mm Hg. Such conditions may result from a variety of causes, such as surgery for **glaucoma**, retinal detachment, uveitis, and the like.

DETD [0048] The exemplified inhibitors described in detail in the Examples include **cariporide**, EIPA (ethylisopropylamiloride), DMA (dimethylamiloride) and **amiloride**, at concentrations characteristic of the NHE-1 isoform. Nevertheless, applicable compounds would include any of the beta blockers (including topical, .beta.- and .beta..sub.1-adrenergic antagonists, such as **timolol**), or **amiloride** analogs, as well as, but not limited to, the many compounds produced by Hoechst, i.e., **cariporide**, as well as other compounds that would be recognized as modulators of Na.sup.+ uptake or the anion exchange system. See, . . .

DETD [0049] In the present invention, a pharmaceutical composition which upon administration increases or decreases secretion of fluids into the **aqueous humor** as compared to the level prior to administration, is termed a "secretion modulator;" and the amount of the modulator necessary. . . is termed the "secretion modulating amount." Similarly, a pharmaceutical composition which upon administration increases or decreases fluid pressure in the **aqueous humor** or **intraocular pressure**, as compared to the level prior to administration, is termed a "pressure modulator;" and the amount of the modulator necessary. . .

DETD . . . composition, which can include drugs, compounds, pharmaceuticals or the like, can be used to treat an individual, such as a **glaucoma** patient.

DETD [0052] Potential physiologic implications. The NHE-1 isoform of the Na.sup.+ /H.sup.+ exchangers is ubiquitously expressed in all eukaryotic cells (Counillon et al., J. Biol Chem 275:1-4 (2000)). . . solute and fluid by the PE cells (the post-RVD RVI). This fluid uptake can be inhibited by blocking the Na.sup.+ /H.sup.+ **antiport** with dimethylamiloride or by blocking Cl.sup.- /HCO.sub.3.sup.- exchange by omitting CO.sub.2 /HCO.sub.3.sup.-. When the Na.sup.+ -K.sup.+ -2Cl.sup.- symport is blocked with bumetanide, the further addition of DIDS also blocks the post-RVD RVI. Thus, the paired exchange of NHE-1 and AE2 can lead to net fluid uptake from the extracellular compartment into the PE cells, as demonstrated in other systems (Jiang. . .

DETD . . . and Cl.sup.- /HCO.sub.3.sup.- antiports) and the effect of blocking both, also explains the clinical efficacy of carbonic anhydrase inhibitors in treating **glaucoma**. Reducing the availability of H.sup.+ and HCO.sub.3.sup.- to both antiports, thereby synergistically inhibits the initial step in **aqueous humor** secretion. The current data suggest that this step could be selectively blocked in glaucomatous patients by specifically inhibiting NHE-1 with low concentrations of EIPA, DMA or **cariporide**, particularly in combination with bumetanide to simultaneously block the symport.

DETD . . . A therapeutically effective amount of the combined agent is that amount necessary to significantly reduce or eliminate symptoms associated with **glaucoma**, particularly to reduce or prevent elevated IOP more effectively than the effect of one of the compositions alone would have. . .

DETD The Control of Sodium/Proton Exchangers to Control the Secretion of Excess Fluids into the **Aqueous Humor**

DETD . . . However, first it was necessary to confirm that the paired antiports are the dominant mechanism in the first step of **aqueous humor** formation. Consequently, one or the other antiport was blocked to measure whether inflow, and therefore IOP, are reduced by the. . .

DETD [0076] After entry of the tip into the anterior chamber, the step change

in hydrostatic pressure forced **aqueous humor** into the micropipette, displacing the low-resistance 3-M KCl filling solution from the tip back toward the shank. The resultant increase. . . electrical resistance generated a signal to a vacuum-pressure pump that produced an equal counter-pressure that maintained the position of the **aqueous humor-KCl** interface at the tip of the micropipette, and thus sustains the original electrical resistance. This counter-pressure equaled the hydrostatic pressure. . .

DETD . . . Fishers, N.Y.) and a piezoelectric step driver (model PZ100; Burleigh). IOP was monitored after positioning the micropipette tip in the **aqueous humor**. The baseline IOP in the present study was 14.2 \pm .0.4 mm Hg (n=113). In measuring drug-induced changes in IOP, each animal. . .

DETD [0084] Among the drugs administered were the selective Na.sup.+/H.sup.+ **antiport** inhibitors (direct inhibitors), dimethylamiloride (DMA) and ethylisopropylamiloride (EIPA) (Sigma Chemical Co). A third such inhibitor also used was BIIB723 (Boehringer/Ingelheim, Biberach an der Riss, Germany), which is a member of the BIIB family of Na.sup.+/H.sup.+ **antiport** blockers. Similar to nearly all other **NHE-1** inhibitors, BIIB723 is an acylguanidine, displaying a selectivity for **NHE-1** over **NHE-2** of approximately 40-fold and an IC.sub.50 of approximately 30 nM in cardiomyocytes and approximately 100 nM in hamster fibroblasts. The parent compound (**amiloride**; Merck, Rahway, N.J.) of the **amiloride** analogues DMA and EIPA is a low-potency inhibitor of both Na.sup.+/H.sup.+ and Na.sup.+/Ca.sup.2+ **antiports** and a higher-potency blocker of ENaC. . .

DETD [0087] DMA, an **amiloride** analogue with a highly selective inhibitory effect on the **NHE-1 antiport** (Counillon et al., Mol. Pharmacol. 44:1041-1045 (1993)) produced a concentration-dependent lowering of IOP (FIG. 3, Table 1). Although the precise. . .

DETD [0088] Another **amiloride** analogue, EIPA, displayed the same minimally effective droplet concentration and enhanced lowering of IOP at 3 mM (300 ng; by 4.1 \pm .1.0 mm Hg, Table 1). A third acylguanidine **antiport** inhibitor, BIIB723, produced a maximal hypotensive effect at 3 mM (16.0 μ g) of 4.9 \pm .1.7 mm Hg, similar to that of. . . μ g; -4.5 \pm .0.5 mm Hg) and 3 mM (16.0 μ g; -4.9 \pm .1.7 mm Hg) and the similar reductions produced by all three **NHE-1** inhibitors tested at 3 mM indicated that a maximal IOP reduction was achieved of 4.1 to 5.0 mm Hg. The. . . IOP.

TABLE 1

Single-Drug Effects of DMA, EIPA, Bumetanide, BIIB723, and Dorzolamide on IOP.

Drug	Class	n	Conc.	Dose	.DELTA.IOP (mm Hg) P
DMA	Na/H antiport inhibitor	3	100 μ M	294 ng	
					+0.9 \pm . 0.9
		23	1 mM	2.94 μ g	-3.8 \pm .
		4	3 mM	8.82 μ g	-5.0 \pm .
EIPA	Na/H antiport inhibitor	3	100 μ M	300 ng	
					+0.8 \pm . 0.2
		10	1 mM	3.00 μ g	-2.6 \pm .
		6	3 mM	9.00 μ g	-4.1 \pm .
BIIB	Na/H antiport inhibitor	3	10 μ M	53.4 ng	
					-0.4 \pm . 1.9
		4	100 μ M	534 ng	-2.7 \pm . 0.4
		17	1. . .		<0.01

DETD . . . of 1 mM for DMA and EIPA (Table 1) appears to correspond to approximately 1 to 10 μ M in the **aqueous humor**, and the minimally effective droplet concentration of 100 μ M for BIIB723 corresponded to **aqueous humor** concentrations

of .about.0.1 to 1 .mu.M. The differences may arise from a higher penetrance for BIIB723, because the IC.sub.50 observed. . . .

DETD that topical application of dorzolamide also reduces IOP, albeit to a lesser extent at the droplet concentrations applied (Table 1). **Amiloride**, which inhibits NHE-1 antiports at a potency 1 to 2 orders of magnitude lower than the **amiloride** analogues DMA and EIPA (Counillon et al., 2000), itself exerted no significant effect on mouse IOP at a droplet concentration. . . . of 1 mM (2.30 .mu.g, n=7, data not shown). To reach a 10-mM concentration, it was necessary to solubilize the **amiloride** in 30% DMSO. After pretreatment with vehicle containing 30% DMSO, subsequent application of 10 mM **amiloride** in the same concentration of vehicle did not alter that IOP (.DELTA.IOP=1.0+-.0.7 mm Hg, n=4, P>0.2). Thus, at a concentration 10 times higher than EIPA's minimal effective concentration, **amiloride** had no effect, consistent with the known ratio of the potency of these inhibitors (3.9:0.07 .mu.M, or .about.56) when applied. . . .

DETD [0091] In contrast to the IOP reductions triggered by the three selective inhibitors of the **NHE-1 antiport** at droplet concentrations of 0.1 to 3 mM (Table 1), blockage of the Na.sup.-K.sup.-2Cl.sup.- symport with droplet concentrations of 0.1. . . .

DETD [0095] In sum, these salient findings demonstrate that inhibitors of the **NHE-1 Na.sup.+/H.sup.+ antiport** reduced IOP at 1-mM droplet concentrations, but the far less potent parent compound (**amiloride**) had no effect on IOP at tenfold higher concentration. Topical application of the carbonic anhydrase inhibitor dorzolamide reduced IOP in. . . . mouse. Similarly, application of a selective Na.sup.-K.sup.-2Cl.sup.- symport inhibitor (bumetanide) itself had no significant effect. However, after first inhibiting the **NHE** antiports, either directly with acylguanidine blockers or indirectly with dorzolamide, the subsequent application of bumetanide triggered a highly significant further. . . .

DETD Determining the Combined Effect in Vivo of Selective Blocking of Entry and Release Steps in **Aqueous Humor** Formation

DETD by selectively and simultaneously (or by producing a combined effect in the patient) blocking both (1) the first step of **aqueous humor** formation (entry into the ciliary epithelium), and (2) the release step of Cl.sup.- from the **aqueous humor**. As discussed with regard to the entry step above, the NHE-1 exchanger can be selectively blocked or inhibited, which is important in the first step of **aqueous humor** formation. However, it is also possible to block activation of the final step of **aqueous humor** formation by applying, e.g., A.sub.3-subtype adenosine-receptor antagonists. . . .

DETD and analysis procedures as described in Example 2, to demonstrate the effect of blocking both entry and exit steps of **aqueous humor** formation in a test animal, an A.sub.3AR-knockout mice. The observations that A.sub.3AR agonists activate Cl.sup.- channel led to the hypothesis that these agonists would increase **aqueous humor** secretion and thereby IOP in vivo, and that A.sub.3AR antagonists would exert the opposite effects. In the absence of the. . . .

DETD the exit step (FIG. 5), blocking the entry step (with acetazolamide), reduced IOP even further by 2-3 mm Hg. The **intraocular pressure** cannot fall below the episcleral venous pressure, which in humans has been estimated to be 8.0-11.5 mm Hg. Thus, the. . . .

DETD effectively and synergistically lower IOP by: (1) double-blocking of uptake step, wherein both transporters in the first (entry step) of **aqueous humor** formation are blocked or inhibited; or (2) blocking of the entry and exit steps, wherein the sodium-hydrogen (Na/H) exchanger underlying. . . . and also the activity is lowered or reduced of the chloride (Cl.sup.-) channels involved in the second (exit) step of **aqueous humor** formation.

CLM What is claimed is:

1. A method for regulating, controlling or modulating **aqueous humor** secretion, comprising the step of administering to ciliary

epithelial cells of the **aqueous humor**, an effective secretion-modulating amount of a combined modulator, which is, or forms, a combination of pharmaceutical compositions comprising an effective. .

4. The method of claim 1, wherein both transporters in the entry step of **aqueous humor** formation (the paired Na^+/H^+ and $\text{Cl}^-/\text{HCO}_3^-$ antiports and the $\text{Na}^+-\text{K}^+-2\text{Cl}^-$ symport) are blocked.

5. The method of claim 1, wherein secretion in the **aqueous humor** cells is elevated, and wherein the combined modulator is administered in an amount sufficient to reduce the elevated secretion.

6. The method of claim 1, wherein the method of regulating, controlling or modulating **aqueous humor** secretion further comprises regulating, controlling or modulating fluid pressure in the **aqueous humor** ciliary epithelial cells.

8. The method of claim 1, wherein the Na^+/H^+ exchange occurs at the **NHE-1 antiport**.

9. The method of claim 1, wherein the $\text{Cl}^-/\text{HCO}_3^-$ exchange occurs at the **AE2 antiport**.

13. The method of claim 12, wherein the modulating effect occurs in the formation of the **aqueous humor** of a human patient, comprising the step of administering to the patient an effective **intraocular pressure**-modulating amount of the combined modulator.

16. The method of claim 1, wherein the regulating, controlling or modulating effect of administering the combined modulator on **aqueous humor** formation is synergistic, as compared with an additive combination of the independent pharmaceutical compositions forming the combined modulator.

18. A method for regulating, controlling or modulating **aqueous humor** secretion, comprising the step of administering to ciliary epithelial cells of the **aqueous humor**, an effective secretion-modulating amount of a combined modulator which is, or forms, a combination of pharmaceutical compositions comprising at least one modulator that blocks or inhibits at least one entry step in the formation of the **aqueous humor** and at least one modulator that activity is lowers or reduces the activity of at least one exit step in the formation of the **aqueous humor**.

20. The method of claim 18, wherein chloride (Cl^-) channels activity, involved in the exit step of **aqueous humor** formation, is lowered or reduced.

21. The method of claim 18, wherein secretion in the **aqueous humor** cells is elevated, and wherein the combined modulator is administered in an amount sufficient to reduce the elevated secretion.

22. The method of claim 18, wherein the method of regulating, controlling or modulating **aqueous humor** secretion, further comprises regulating, controlling or modulating fluid pressure in the **aqueous humor** ciliary epithelial cells.

27. The method of claim 26, wherein the modulating effect occurs in the formation of the **aqueous humor** of a human patient, comprising the step of administering to the patient an effective **intraocular pressure**-modulating amount of the combined modulator.

30. The method of claim 18, wherein the regulating, controlling or modulating effect of administering the combined modulator on **aqueous humor** formation is synergistic, as compared with an additive combination of the independent pharmaceutical

compositions forming the combined modulator.

IT 2609-46-3, Amiloride
(combination therapy to treat glaucoma by controlling secretion of
excess fluids into aq. humor)

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L4 0 S ISOPROPYL ETHYL AMILORIDE
L5 131 S AMILORIDE
L6 4 S ETHYL AMILORIDE
L7 1 S CARIPORIDE/CN

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L8 31558 S L1 OR TIMOLOL
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L10 507 S L7 OR ACRIPORIDE
L11 1505 S L7 OR CARIPORIDE
L12 95722 S L8 OR L9 OR L11
L13 159500 S GLAUCOMA
L14 34931 S AQUEOUS HUMOR
L15 0 S S ANTIPORT (S) MODULAT?
L16 457 S ANTIPORT (S) MODULAT?
L17 923 S ANTIPORT? (S) MODULAT?
L18 9965 S L12 AND L13
L19 13 S L18 AND L17
L20 10 DUP REM L19 (3 DUPLICATES REMOVED)
L21 82563 S INTRAOCULAR PRESSURE
L22 5371 S L18 AND L21
L23 730 S L14 AND L22
L24 3138 S SODIUM PROTON (S) EXCHANGE
L25 0 S L24 AND L23
L26 0 S AE-2 ANTIPORT
L27 3 S NHE-1 ANTIPORT
L28 3 S NHE ANTIPORT
L29 206 S NHE (S) ANTIPORT
L30 30 S AE2 (S) ANTIPORT
L31 4 S L29 AND L30
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TITLE: Puerarin eyedrops: reduction of **intraocular**
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humor

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TI Puerarin eyedrops: reduction of **intraocular pressure** and determination in **aqueous humor**

AB Chronic ocular hypertension was produced in rabbits by injection of dexamethasone (0.5 mg every other day for 3 wk) into the bulbar subconjunctiva of the superior corneal margin of the rabbit eye; acute ocular hypertension was induced by rapid i.v. injection of glucose at 15 mg/kg. A reversed-phase HPLC method with UV detection was used to det. puerarin in aq. humor. The potency of 10 g puerarin/L in reducing intraocular hypertension was similar to that of 5 g **timolol**/L, but the duration of action of puerarin was longer than that of **timolol**. The pharmacokinetic parameters of puerarin in the aq. humor were: t1/2.alpha. = 0.69 h; t1/2.beta. = 8.32 h; Cmax = 0.963 mg/L; AUC = 5.16 mg/h/L; tmax = 2.0 h. Thus, 10-g/L puerarin eyedrops can decrease intraocular hypertension induced by i.v. injection of glucose and topical dexamethasone. The reversed-phase HPLC-UV method used is simple and sensitive for the detn. of puerarin in aq. humor.

ST puerarin eyedrop intraocular hypertension aq humor HPLC; **glaucoma** puerarin eyedrop

IT Eye
(aq. humor; puerarin eyedrops: redn. of **intraocular pressure** and detn. in aq. humor by HPLC)

IT **Glaucoma** (disease)
(puerarin eyedrops: redn. of **intraocular pressure** and detn. in aq. humor by HPLC)

IT Drug delivery systems
(solns., ophthalmic; puerarin eyedrops: redn. of **intraocular pressure** and detn. in aq. humor by HPLC)

IT 3681-99-0, Puerarin
RL: ANT (Analyte); BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); ANST (Analytical study); BIOL (Biological study)
(puerarin eyedrops: redn. of **intraocular pressure** and detn. in aq. humor by HPLC)

L35 ANSWER 171 OF 552 SCISEARCH COPYRIGHT 2003 THOMSON ISI on STN

ACCESSION NUMBER: 1999:737621 SCISEARCH

THE GENUINE ARTICLE: 238ZB

TITLE: Metabolites of isopropyl unoprostane as potential ophthalmic solutions to reduce **intraocular pressure** in pigmented rabbits

AUTHOR: Kashiwagi K (Reprint); Iizuka Y; Tsukahara S

CORPORATE SOURCE: YAMANASHI MED UNIV, DEPT OPHTHALMOL, YAMANASHI 4093898, JAPAN (Reprint)

COUNTRY OF AUTHOR: JAPAN

SOURCE: JAPANESE JOURNAL OF PHARMACOLOGY, (SEP 1999) Vol. 81, No. 1, pp. 56-62.

Publisher: JAPANESE PHARMACOLOGICAL SOC, EDITORIAL OFF, KANTOHYA BLDG GOKOMACHI-EBISUGAWA NAKAGYO-KU, KYOTO 604, JAPAN.

ISSN: 0021-5198.

DOCUMENT TYPE: Article; Journal

FILE SEGMENT: LIFE

LANGUAGE: English

REFERENCE COUNT: 21

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

TI Metabolites of isopropyl unoprostane as potential ophthalmic solutions to reduce **intraocular pressure** in pigmented rabbits

AB . . . rabbits to clarify which metabolites are involved in actions in the eye. Tritium-labeled isopropyl unoprostane eyedrops were

administered. The cornea, **aqueous humor**, iris, ciliary body and retina were then collected at 5, 15 or 30 min or at 2, 6 or 12. . . M1, and the further metabolized compound, M2, were detected; and the concentrations of these metabolites decreased with time. In the **aqueous humor**, M1, M2 and another metabolite, M3, were detected, with peak concentrations of M1 at 30 min and M2 at 2. . . iris and ciliary body showed a similar metabolism with peak concentrations of M1 and M2 at 30 min. In the **aqueous humor**, iris and ciliary body, M2 was the dominant metabolite from 30 min. In the retina, only total radioactivity was detected.. . .

ST Author Keywords: isopropyl unoprostone; prostaglandin; **glaucoma**; metabolism; esterase

STP KeyWords Plus (R): PROSTAGLANDIN-RELATED COMPOUND; **AQUEOUS-HUMOR DYNAMICS**; TOPICAL APPLICATION; UF-021; **GLAUCOMA**; EYES; PHARMACOKINETICS; **TIMOLOL**; DRUG; IRIS

L35 ANSWER 172 OF 552 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V. on STN

ACCESSION NUMBER: 2000060014 EMBASE

TITLE: Brimonidine 0.2% behaviour on **intraocular pressure** in **Timolol**-uncontrolled glaucomatous patients.

AUTHOR: Centofanti M.; Manni G.L.; Gregori D.; Parisi V.; Cocco F.; Bucci M.G.

CORPORATE SOURCE: M. Centofanti, Eye Clinic, University 'Tor Vergata' of Rome, Roma, Italy

SOURCE: Acta Ophthalmologica Scandinavica, Supplement, (1999) 77/229 (52).

Refs: 5

ISSN: 1395-3931 CODEN: AOSSFB

COUNTRY: Denmark

DOCUMENT TYPE: Journal; Conference Article

FILE SEGMENT: 012 Ophthalmology
030 Pharmacology
037 Drug Literature Index

LANGUAGE: English

TI Brimonidine 0.2% behaviour on **intraocular pressure** in **Timolol**-uncontrolled glaucomatous patients.

CT Medical Descriptors:

***glaucoma**: DT, drug therapy

***intraocular pressure**

aqueous humor flow

drug binding

drug efficacy

open angle glaucoma: DT, drug therapy

pressure volume curve

pulsatile drug release

receptor affinity

tonometry

human

clinical article

male

female

aged

adult

conference paper

priority journal

*alpha adrenergic receptor stimulating agent: CM, drug. . .

pharmacology

*alpha adrenergic receptor stimulating agent: TP, topical drug

administration

*brimonidine: CM, drug comparison

*brimonidine: DT, drug therapy

*brimonidine: PD, pharmacology

*brimonidine: TP, topical drug administration

***timolol**: DT, drug therapy

alpha 2 adrenergic receptor: EC, endogenous compound

apraclonidine: CM, drug comparison

beta adrenergic receptor blocking agent: DT, drug therapy

clonidine: CM, . . .

.RN (brimonidine) 59803-98-4; (timolol) 26839-75-8;
(apraclonidine) 66711-21-5; (clonidine) 4205-90-7, 4205-91-8, 57066-25-8

L35 ANSWER 173 OF 552 SCISEARCH COPYRIGHT 2003 THOMSON ISI on STN

ACCESSION NUMBER: 2000:160250 SCISEARCH

THE GENUINE ARTICLE: 286HX

TITLE: Brimonidine 0.2(behaviour on intraocular
pressure in Timolol-uncontrolled
glaucomatous patients

AUTHOR: Centofanti M (Reprint); Manni G L; Gregori D; Parisi V;
Cocco F; Bucci M G

CORPORATE SOURCE: UNIV ROMA TOR VERGATA, EYE CLIN, ROME, ITALY (Reprint); GB
BIETTI FDN OPHTHALMOL, ROME, ITALY; FATEBENEFRATELLI HOSP,
OCULUST DIV, AFAR CRCCS, ROME, ITALY

COUNTRY OF AUTHOR: ITALY

SOURCE: ACTA OPHTHALMOLOGICA SCANDINAVICA, (SEP 1999) Vol. 77,
Supp. [229], pp. 52-52.

Publisher: SCRIPTOR PUBLISHER, SOVANGSVEJ 1-5, DK-2650
HVIDOVRE, DENMARK.

ISSN: 1395-3907.

DOCUMENT TYPE: Article; Journal

FILE SEGMENT: CLIN

LANGUAGE: English

REFERENCE COUNT: 5

TI Brimonidine 0.2(behaviour on intraocular **pressure** in
Timolol-uncontrolled glaucomatous patients

ST Author Keywords: beta-blocker; alpha-adrenoceptor agonist; long-term
drift; **glaucoma**

STP KeyWords Plus (R): **AQUEOUS-HUMOR DYNAMICS**;
ALPHA-2-ADRENERGIC AGONISTS

L35 ANSWER 174 OF 552 MEDLINE on STN DUPLICATE 31

ACCESSION NUMBER: 2000105853 MEDLINE

DOCUMENT NUMBER: 20105853 PubMed ID: 10641099

TITLE: [Alpha-2 adrenergic agonists in the treatment of
glaucoma].

Agonistii alfa 2 adrenergici in tratamentul glaucomului.

AUTHOR: Apatachioae I; Chiselita D

SOURCE: OFTALMOLOGIA, (1999) 47 (2) 35-40. Ref: 28

Journal code: 9111247. ISSN: 1120-0875.

PUB. COUNTRY: Romania

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)

LANGUAGE: Romanian

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200002

ENTRY DATE: Entered STN: 20000209

Last Updated on STN: 20030204

Entered Medline: 20000203

TI [Alpha-2 adrenergic agonists in the treatment of **glaucoma**].

Agonistii alfa 2 adrenergici in tratamentul glaucomului.

AB The study represent an up-to-date of the role and place of alpha

2-adrenergic agonists in **glaucoma** treatment. The first
available alpha 2-agonist, clonidine is of historical importance today.

Apraclonidine decrease the **aqueous humor** secretion and
episcleral venous pressure. It is employed to prevent or blunt the acute
intraocular pressure rise after ocular laser therapy.

It is not recommended as long term therapy due to its high incidence of
local adverse reactions and tachyphylaxis. Brimonidine became the alpha
2-agonist of choice in **glaucoma** chronic treatment, acting by
decreasing **aqueous humor** secretion and increasing
uveoscleral outflow. It has a lower incidence of the ocular adverse
effects because of greater alpha 2 selectivity. Brimonidine has
neuroprotective effect, which is an important feature in the new contexts
of **glaucoma** pathogenesis. Brimonidine has hypotensor effect
similar with **timolol** but with a greater incidence of adverse
local reactions. It has been no effects on cardiopulmonary function.
Brimonidine would be. . .

CT
 therapeutic use
 Clonidine: AE, adverse effects
 Clonidine: AA, analogs & derivatives
 Clonidine: PD, pharmacology
 Clonidine: TU, therapeutic use
 English Abstract
 *Glaucoma: DT, drug therapy
 Glaucoma: PP, physiopathology
 Intraocular Pressure: DE, drug effects
 Quinoxalines: AE, adverse effects
 Quinoxalines: PD, pharmacology
 Quinoxalines: TU, therapeutic use
 *Receptors, Adrenergic, alpha-2: AG, . . .

L35 ANSWER 175 OF 552 CAPLUS COPYRIGHT 2003 ACS on STN DUPLICATE 32

ACCESSION NUMBER: 1999:115495 CAPLUS

DOCUMENT NUMBER: 130:280147

TITLE: **Aqueous humor** dynamics in
 .alpha.-chymotrypsin-induced ocular hypertensive
 rabbits

AUTHOR(S): Melena, Jose; Santafe, Juan; Segarra-Domenech, Jose;
 Puras, Gustavo

CORPORATE SOURCE: Departamento de Framacologia, Facultad de Farmacia,
 Universidad del Pais Vasco, Paseo de la Universidad,
 Vitoria, Spain

SOURCE: Journal of Ocular Pharmacology and Therapeutics
 (1999), 15(1), 19-27
 CODEN: JOPTFU; ISSN: 1080-7683

PUBLISHER: Mary Ann Liebert, Inc.

DOCUMENT TYPE: Journal

LANGUAGE: English

REFERENCE COUNT: 19 THERE ARE 19 CITED REFERENCES AVAILABLE FOR THIS
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI **Aqueous humor** dynamics in .alpha.-chymotrypsin-induced
 ocular hypertensive rabbits

AB Aq. humor dynamics were studied in .alpha.-chymotrypsin-induced ocular
 hypertensive rabbits either by tonog. or two-level const. pressure
 perfusion techniques. A significant correlation was obtained between the
 values of outflow facility in .alpha.-chymotrypsin-induced ocular
 hypertensive rabbits as detd. by tonog. and const. pressure perfusion.
 The mean value of tonog. outflow facility in ocular hypertensive rabbits
 was not statistically different from that found in ocular normotensive
 rabbits. On the contrary, the estd. rate of aq. inflow in ocular
 hypertensive rabbits was about 1.5-fold higher than that of ocular
 normotensive ones. While topical **timolol** lowered
 intraocular pressure and aq. humor inflow in ocular
 hypertensive rabbits, pilocarpine did not produce any significant effect.
 Aq. humor protein was significantly increased in ocular hypertensive eyes.
 The results of this study show that accurate measurements of outflow
 facility can be obtained in .alpha.-chymotrypsin-induced ocular
 hypertensive rabbits by tonog. technique. The data suggest that the
 long-term ocular hypertension induced by .alpha.-chymotrypsin in albino
 rabbits may be secondary to an increase in the rate of aq. humor inflow,
 likely produced by a breakdown of the blood-aq. barrier. This finding
 strongly conflicts with the hypothesis of trabecular blockage as the cause
 of .alpha.-chymotrypsin-induced ocular hypertension in this species.

ST aq humor chymotrypsin **glaucoma** ocular hypertension

IT **Glaucoma** (disease)

Rabbit

(aq. humor dynamics in .alpha.-chymotrypsin-induced ocular hypertensive
 rabbits)

IT Disease models

(**glaucoma**; aq. humor dynamics in .alpha.-chymotrypsin-induced
 ocular hypertensive rabbits)

IT 92-13-7, Pilocarpine 26839-75-8, **Timolol**

RL: BAC (Biological activity or effector, except adverse); BSU (Biological
 study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES
 (Uses)

(ocular hypertension induced by .alpha.-chymotrypsin in rabbits
sensitivity to)

L35 ANSWER 176 OF 552 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN
DUPLICATE 33

ACCESSION NUMBER: 1999:150148 BIOSIS
DOCUMENT NUMBER: PREV199900150148
TITLE: Prolonged, contemporaneous administration of pilocarpine
and timolol increases the aqueous
humor pilocarpine levels in rabbits.
AUTHOR(S): Burgalassi, S.; Chetoni, P. (1); Panichi, L.; Saettone, M.
F.
CORPORATE SOURCE: (1) Dep. Pharmaceutical Sci., Lab. Pharmaceutical Technol.
Biopharmaceutics, Univ. Pisa, I-56126 Pisa Italy
SOURCE: Journal of Ocular Pharmacology and Therapeutics, (Feb.,
1999) Vol. 15, No. 1, pp. 1-7.
ISSN: 1080-7683.
DOCUMENT TYPE: Article
LANGUAGE: English

TI Prolonged, contemporaneous administration of pilocarpine and
timolol increases the aqueous humor
pilocarpine levels in rabbits.
AB The purpose of this study was to gather information on the mechanism by
which timolol/pilocarpine (TI/PI) combination eyedrops provide
additive ocular hypotensive effects. An hypothesis, according to which the
combination eyedrops prolong the intraocular permanence of PI as a
consequence of decreased aqueous humor secretion
induced by TI, was not supported by clear-cut literature evidence. It was
thus sought to verify if repeated instillations. . . PI hydrochloride
alone (2% w/v), buffered at pH 5.5 and 6.8, were instilled b.i.d. in
albino rabbits for five days. Aqueous humor samples,
analyzed after the last treatment, showed that the aqueous
humor PI levels observed after administration of the combination
eyedrops were significantly higher than those resulting from
administration of the reference. . . with the pH 6.8 reference
solution, the pH 5.5 one produced slightly higher and more sustained drug
levels in the aqueous humor. The present results
appear to confirm the assumption that an increased retention of PI in the
aqueous humor is responsible for the additive effects on
intraocular pressure reported by several authors for the
combination TI/PI eyedrops.

IT Major Concepts
Pharmacology; Sense Organs (Sensory Reception)
IT Diseases
open-angle glaucoma: eye disease, treatment
IT Chemicals & Biochemicals
pilocarpine: antiglaucoma - drug, aqueous human levels, contemporaneous
administration, prolonged administration; timolol:
antiglaucoma - drug, contemporaneous administration, prolonged
administration
IT Alternate Indexing
Glaucoma, Open-Angle (MeSH)
IT Miscellaneous Descriptors
intraocular pressure
RN 92-13-7 (PILOCARPINE)
26839-75-8 (TIMOLOL)

L35 ANSWER 177 OF 552 USPATFULL on STN
ACCESSION NUMBER: 1998:115761 USPATFULL
TITLE: Prophylactic and therapeutic methods for ocular
degenerative diseases and inflammations and histidine
compositions therefor
INVENTOR(S): Thomas, Peter G., Charlottesville, VA, United States
PATENT ASSIGNEE(S): Cytos Pharmaceuticals LLC, Durham, NC, United States
(U.S. corporation)

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 5811446		19980922

APPLICATION INFO.: US 8398054 19970418 (8)
DOCUMENT TYPE: Utility
FILE SEGMENT: Granted
PRIMARY EXAMINER: Kight, John
ASSISTANT EXAMINER: Covington, Raymond
LEGAL REPRESENTATIVE: Angres, Isaac A., Petraglia, Susan P.
NUMBER OF CLAIMS: 45
EXEMPLARY CLAIM: 1
LINE COUNT: 1037

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

SUMM . . . vision also arises as a result of ischemia-reperfusion injury that is associated with retinal arterial occlusion, retinal venous occlusion, and **glaucoma**.

SUMM . . . the eye, and especially the cornea. Physical trauma to the cornea may be accompanied by intraocular inflammation, synechiae leading to **glaucoma**, and secondary membrane formation. Collagen is the major structural protein of the cornea. The normal host response to inflammation produces. . .

SUMM Degenerative eye conditions within the purview of the preferred aspects of the invention include, for example, **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), corneal amyloidosis, age-related macular degeneration, retinal photic injury,. . .

SUMM . . . effectively treat ocular inflammation and its attendant cell damage associated with, for example, one or more diseases or degenerations including **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), corneal amyloidosis, age-related macular degeneration, retinal photic injury,. . .

SUMM . . . bind collagen (and glycoaminoglycans as well) of the stromal matrix, causing hydration or swelling and shortening of the collagen fibrils. **Glaucoma** is a common sequela of alkali burns, due to a rapid rise in **intraocular pressure** attributable to this shortening of collagen fibrils. The alkali also renders the collagen fibrils more susceptible to enzymatic degradation ("naked. . . cells are not known to contain either latent or active collagenase. Further, if the alkali penetrates the ciliary body, the **aqueous humor** experiences a significant drop in aqueous glucose and ascorbate concentrations. Ascorbate is essential to the biosynthesis of both collagen and. . .

SUMM . . . chromic acid, nitric acid, and acetic acid. Acid burns cause tissue damage by coagulating and precipitating ocular proteins, and secondary **glaucoma** as the result of reacting with collagen (by fibril shortening.) In both alkali and acid burns, the course of therapy. . . usually entails irrigating the eye, followed by administration of one or more of topical antibiotics, topical steroids, collagenase inhibitors, and anti-**glaucoma** agents, oral or topical ascorbate. It is intended that histidine be administered therapeutically following irrigation of the eye injured by. . . 0.3% gentamicin drops or bacitracin ointment), topical steroids (e.g., 1% prednisolone, or 0.1% dexamethasone), collagenase inhibitors (e.g., 10-20% acetyl cysteine), anti-**glaucoma** agents (e.g., 10% phenylephrine) in combination with 2% atropine (a cycloplegic), and oral or topical ascorbate.

SUMM . . . injury, a penetrating injury, or a perforating foreign body which may be accompanied by intraocular inflammation, synechiae which leads to **glaucoma**, and secondary membrane formation. It is equally envisioned that histidine be administered during and after suturing to reduce the inflammation.. . .

SUMM . . . cycloplegic exemplified by atropine; a moitic exemplified by physostigmine, pilocarpine, and carbachol; an antiglaucoma agents exemplified by phenylephrine, acetazolamide, and **timolol** maleate; a collagenase inhibitor exmeplified by acetyl cysteine; a glycoprotein such as fibronectin and vitronectin, as well as analogs or.

DETD The following combination therapy as an ophthalmic solution is intended to reduce inflammation and **intraocular pressure** following photoablation of the cornea to improve wound healing:

DETD . . . eye drops (5.0 wt. % histidine, 2-4 drops, 4 times daily) oral

acetazolamide (250 mg, 4 times daily) (for secondary **glaucoma** therapy) is suitable for alkali burns.

CLM What is claimed is:

2. The method according to claim 1 wherein said degenerative eye condition comprises **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), corneal amyloidosis, age-related macular degeneration, retinal photic injury, . . .

6. The method according to claim 5 wherein said degenerative eye condition comprises **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), Dellen, Terrein's Marginal Degeneration, or calcific band keratopathy.

. . . antiviral agent, a corticosteroid, an hydroxyacid, a ketoacid, a non-steroidal antiinflammatory agent, a cycloplegic, a miotic, a collagenase inhibitor, an anti-**glaucoma** agent, a carbonic anhydrase inhibitor, a glycoprotein, and silver nitrate.

. . . amantadine, rimantadine, dexamethasone, prednisolone, prednisone, fluorometholone, betamethasone, hydrocortisone, ketorolac, indomethacin, flurbiprofen, ketoprofen, loxoprofen, diclofenac, atropine, pilocarpine, carbachol, physostigmine, phenylephrine, acetazolamide, **timolol** maleate, fibronectin and vitronectin as well as analogs or fragments thereof, and acetyl cysteine.

. . . antioxidant, an antiviral, a corticosteroid, an hydroxyacid, a ketoacid, a non-steroidal antiinflammatory, a cycloplegic, a miotic, a collagenase inhibitor, an anti-**glaucoma** agent, a carbonic anhydrase inhibitor, a glycoprotein, and silver nitrate.

. . . amantadine, rimantadine, dexamethasone, prednisolone, prednisone, fluorometholone, betamethasone, hydrocortisone, ketorolac, indomethacin, flurbiprofen, ketoprofen, loxoprofen, diclofenac, atropine, pilocarpine, carbachol, physostigmine, phenylephrine, acetazolamide, **timolol** maleate, fibronectin and vitronectin as well as analogs or fragments thereof, and acetyl cysteine.

. . . hydrocortisone, an .alpha.-hydroxyacid, a .beta.-hydroxyacid, an .alpha.-ketoacid, a .beta.-ketoacid, ketorolac, indomethacin, flurbiprofen, loxoprofen, diclofenac, atropine, pilocarpine, carbachol, physostigmine, phenylephrine, acetazolamide, **timolol** maleate, fibronectin and vitronectin as well as analogs or fragments thereof, acetyl cysteine, or mixtures thereof.

L35 ANSWER 178 OF 552 USPATFULL on STN
 ACCESSION NUMBER: 1998:115758 USPATFULL
 TITLE: Combinations of prostaglandins and clonidine derivatives for the treatment of **glaucoma**
 INVENTOR(S): DeSantis, Jr., Louis, Fort Worth, TX, United States
 Sallee, Verney L., Southlake, TX, United States
 PATENT ASSIGNEE(S): Alcon Laboratories, Inc., Fort Worth, TX, United States (U.S. corporation)

	NUMBER	KIND	DATE
PATENT INFORMATION:	US 5811443		19980922
APPLICATION INFO.:	US 8036675		19970221 (8)
RELATED APPLN. INFO.:	Continuation of Ser. No. 571326, filed on 12 Dec 1995, now patented, Pat. No. 5605922 which is a continuation of Ser. No. 422570, filed on 10 Apr 1995, now patented, Pat. No. 5480900 which is a continuation of Ser. No. 213380, filed on 14 Mar 1994, now abandoned which is a continuation of Ser. No. 960065, filed on 13 Oct 1992, now abandoned		
DOCUMENT TYPE:	Utility		
FILE SEGMENT:	Granted		
PRIMARY EXAMINER:	Fay, Zohreh		

LEGAL REPRESENTATIVE: Copeland, Barry L.

NUMBER OF CLAIMS: 13

EXEMPLARY CLAIM: 1

LINE COUNT: 500

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

TI Combinations of prostaglandins and clonidine derivatives for the treatment of **glaucoma**

AB Combinations of at least one clonidine derivative and at least one prostaglandin are used to treat **glaucoma** and ocular hypertension without some of the side effects typically associated with topical administration of prostaglandins.

SUMM The present invention relates generally to the field of ophthalmology. In particular, the invention relates to the treatment of **glaucoma** and ocular hypertension using a combination of at least one clonidine derivative (e.g., para-amino clonidine) and at least one prostaglandin.

SUMM Although the underlying causes of **glaucoma** are not understood, its symptoms often include elevated **intraocular pressure**, which may be caused either by over-production of **aqueous humor** or by inadequate outflow of **aqueous humor**. If left untreated, or if inadequately treated, **glaucoma** can lead to blindness or significant loss of vision. There is therefore a continuing need for therapies which control the elevated **intraocular pressure** associated with **glaucoma**.

SUMM There are currently a number of drugs utilized in the treatment of **glaucoma**, including: miotics (e.g., pilocarpine, carbachol and acetylcholinesterase inhibitors); sympathomimetics (e.g., epinephrine and dipivalylepinephrine); alpha-2 agonists (e.g., para-amino clonidine); beta-blockers (e.g., betaxolol, levobunolol and **timolol**); and carbonic anhydrase inhibitors (e.g., acetazolamide, methazolamide and ethoxzolamide). Miotics and sympathomimetics are believed to lower IOP by increasing the outflow of **aqueous humor** through the trabecular meshwork, while beta-blockers, alpha-2 agonists and carbonic anhydrase inhibitors are believed to lower IOP by decreasing the formation of **aqueous humor**.

SUMM In addition, although they have not yet been approved for anti-**glaucoma** therapy, certain classes of prostaglandins and prostaglandin analogues (hereinafter collectively referred to as "prostaglandins") have been shown in various animal models and in some clinical studies to reduce **intraocular pressure** (IOP) to a greater extent than most currently used therapeutic agents. See, for example: U.S. Pat. No. 4,097,489 (Bundy), U.S. . . . et al.). In contrast to the case with miotics, prostaglandins are believed to lower IOP by increasing the outflow of **aqueous humor** via the uveo-scleral route. In addition, prostaglandins may possibly have other effects in the eye, such as enhancing vascular support. . . .

SUMM . . . can also cause serious side effects which affect patient compliance and/or necessitate the withdrawal of treatment; at least one beta-blocker, **timolol**, has increasingly become associated with serious pulmonary side effects attributable to its effect on beta-2 receptors in pulmonary tissue; and. . . day. Patient compliance with such complicated dosage regimens can be very poor, particularly in elderly patients. Since the majority of **glaucoma** patients are elderly, this patient compliance problem is significant.

SUMM In light of the foregoing circumstances, it is clear that a need exists for new, more potent anti-**glaucoma** compositions which avoid or reduce the above-cited side effects, while increasing patient compliance. The present invention is directed to such. . . .

SUMM . . . been found that administration of one or more prostaglandins in combination with one or more clonidine derivatives controls or lowers **intraocular pressure** (IOP) without the accompanying inflammatory response (including hyperemia) typically found with prostaglandins. The present invention therefore provides compositions and methods useful for the treatment of **glaucoma** and ocular hypertension. The compositions contain a combination of at least one clonidine derivative and at least one prostaglandin which. . . .

DETD The present invention utilizes combinations of at least one clonidine

derivative and at least one prostaglandin to treat **glaucoma** and ocular hypertension.

DETD . . . of this compound are incorporated herein by reference. It is also known that certain clonidine derivatives are effective in lowering **intraocular pressure** when applied topically to the eye; this discovery is described in U.S. Pat. No. 4,461,904 (York, Jr.), the entire contents. . . .

DETD . . . and their pharmaceutically acceptable esters and salts (hereinafter collectively referred to as "prostaglandins" or "PG's"), which are capable of reducing **intraocular pressure** when applied topically to the eye. Such prostaglandins include the natural compounds: PGE.sub.1, PGE.sub.2, PGE.sub.3, PGF.sub.1.alpha., PGF.sub.2.alpha., PGF.sub.3.alpha., PGD.sub.2 and. . . .

DETD The present invention is also directed to methods of treating **glaucoma** and other ophthalmic diseases and abnormalities. The methods comprise topically applying to the affected eye(s) of the patient a therapeutically. . . .

CLM What is claimed is:

1. A topical ophthalmic composition for the treatment of **glaucoma**, comprising a combination of a pharmaceutically effective amount of at least one prostaglandin and a pharmaceutically effective amount of at. . . .
8. A method of treating **glaucoma**, comprising applying to an affected eye a pharmaceutically effective amount of at least one prostaglandin and a pharmaceutically effective amount. . . .

=> d his

(FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)

FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003

L1	1 S TIMOLOL/CN
L2	1 S AMILORIDE/CN
L3	0 S ETHYL ISOPROPYL AMILORIDE
L4	0 S ISOPROPYL ETHYL AMILORIDE
L5	131 S AMILORIDE
L6	4 S ETHYL AMILORIDE
L7	1 S CARIPORIDE/CN

FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN, DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE, ESBIODASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE, NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON 27 JUL 2003

L8	31558 S L1 OR TIMOLOL
L9	64288 S L2 OR AMILORIDE
L10	507 S L7 OR ACIPORIDE
L11	1505 S L7 OR CARIPORIDE
L12	95722 S L8 OR L9 OR L11
L13	159500 S GLAUCOMA
L14	34931 S AQUEOUS HUMOR
L15	0 S S ANTIPTORT (S) MODULAT?
L16	457 S ANTIPTORT (S) MODULAT?
L17	923 S ANTIPTORT? (S) MODULAT?
L18	9965 S L12 AND L13
L19	13 S L18 AND L17
L20	10 DUP REM L19 (3 DUPLICATES REMOVED)
L21	82563 S INTRAOCULAR PRESSURE
L22	5371 S L18 AND L21
L23	730 S L14 AND L22
L24	3138 S SODIUM PROTON (S) EXCHANGE
L25	0 S L24 AND L23
L26	0 S AE-2 ANTIPTORT
L27	3 S NHE-1 ANTIPTORT
L28	3 S NHE ANTIPTORT
L29	206 S NHE (S) ANTIPTORT
L30	30 S AE2 (S) ANTIPTORT
L31	4 S L29 AND L30

L32 1 S L31 AND L23
L33 232 S L29 OR L30
L34 1 S L23 AND L33
L35 552 DUP REM L23 (178 DUPLICATES REMOVED)

=> s l11 and l13
95% OF LIMIT FOR L#S REACHED
L36 9 L11 AND L13

=> dup rem
ENTER L# LIST OR (END):l36
DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGLAUNCH,
DRUGMONOG2, KOSMET, MEDICONF, NUTRACEUT, PCTGEN, PHARMAML'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L36
L37 4 DUP REM L36 (5 DUPLICATES REMOVED)

=> d l37 1-4 ibib, kwic

L37 ANSWER 1 OF 4 USPATFULL on STN

ACCESSION NUMBER: 2003:120743 USPATFULL
TITLE: Novel combination therapy to treat **glaucoma**
INVENTOR(S): Civan, Mortimer M., Wynnewood, PA, UNITED STATES
Jacobson, Kenneth A., Silver Spring, MD, UNITED STATES
MacKnight, Anthony D.C., Dunedin, NEW ZEALAND
Mitchell, Claire H., Philadelphia, PA, UNITED STATES
Stone, Richard A., Havertown, PA, UNITED STATES

	NUMBER	KIND	DATE
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LEGAL REPRESENTATIVE:	Evelyn H. McConathy, Esquire, Dilworth Paxson LLP, 3200 Mellon Bank Center, 1735 Market Street, Philadelphia, PA, 19103	
NUMBER OF CLAIMS:	31	
EXEMPLARY CLAIM:	1	
NUMBER OF DRAWINGS:	6 Drawing Page(s)	
LINE COUNT:	1250	

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

TI Novel combination therapy to treat **glaucoma**

SUMM . . . The present invention relates to the field of ophthalmology. In particular, the invention relates to the prevention and treatment of **glaucoma** and associated elevations of intraocular pressure.

SUMM . . . the world, currently affecting an estimated three million people in the United States, with 300,000 new cases diagnosed every year. **Glaucoma** results from obstructed outflow from the aqueous humor of the eye, resulting in elevated intraocular pressure in the anterior chamber, . . . can also be caused by other conditions, such as impaired intraocular fluid transport caused by eye surgery, including surgery for **glaucoma**. The IOP, itself, reflects a balance between the rates of inflow (fluid formation) and outflow (fluid return) of the aqueous humor by re-absorption. Medical approaches to treating **glaucoma** are frequently directed at reducing the rate of net formation of aqueous humor.

SUMM . . . Ophthalmol. Vis. Sci. 17:958-981 (1978); Walker et al., 1999; Wolosin et al., In: The Eye's Aqueous Humor: From Secretion to **Glaucoma**, Civan (ed), Academic Press, Boston, pp 135-162 (1998)).

SUMM . . . use of systemic and topical drugs for lowering intraocular

pressure. At the present time, medical control of intraocular pressure and **glaucoma** consists of topical, oral or intravitreal administration of many compounds. See generally, Horlington, U.S. Pat. No. 4,425,346; Komuro et al., . . .

SUMM [0015] Among the most effective medical therapies for **glaucoma** are strategies aimed at reducing intraocular pressure by reducing the net rate of aqueous humor formation by the ocular ciliary epithelial bilayer (see generally, Shields, Textbook of **Glaucoma**, 3rd Ed., Williams & Wilkins, Baltimore (1992)). This can occur either by blocking unidirectional secretion from stroma to the aqueous. . .

SUMM [0016] Four primary classes of drugs are used to treat **glaucoma**. These include: miotics (e.g., pilocarpine, carbachol and acetylcholinesterase inhibitors); sympathomimetics (e.g., epinephrine, metipranolol, dipivefrin, carbachol, dipivalyl, and parn-aminoclonidine); beta-blockers (e.g., . . .

SUMM . . . than normal intraocular pressure can also be problematic, caused for example, by a variety of conditions, such as surgery for **glaucoma**, retinal detachment, uveitis, and the like. However, since no drugs are presently available for the safe and effective prevention, modulation. . .

SUMM . . . level, although primarily the invention will be useful to relieve or prevent elevated levels of intraocular fluid in, for example, **glaucoma** patients, before vision is adversely and permanently affected. In addition, the present combined therapeutic methods permit known compounds to be. . .

DETD [0031] The methods and compositions of the present invention are intended for treatment of **glaucoma** and other conditions, which manifest elevated intraocular pressure in the eye of a patient, particularly human patients, but also including other mammalian hosts. **Glaucoma** is a term which embraces a group of ocular diseases characterized by elevated intraocular pressure levels which can damage the eye, and destroy the optic nerve and related ganglia. In addition, normotensive **glaucoma** is characterized by an apparent nonelevated intraocular pressure. However, for the patient suffering from normotensive **glaucoma**, the apparently normal pressure is sufficiently high for that particular patient as to cause the same types of nerve and. . .

DETD . . . antiports provide the dominant entry pathway under physiological conditions, and further suggested that carbonic anhydrase inhibitors (commonly used to treat **glaucoma**) act by blocking Na.sup.+ /H.sup.+ exchange. More recently an electron-probe X-ray microanalysis (McLaughlin et al., Am. J. Physiol. Cell Physiol. 281:C865-C875(2001)). . .

DETD . . . and it is desirable that such elevated pressures be lowered to below 18 mm Hg. In the case of low-tension **glaucoma**, it is desirable for the intraocular pressure to be lowered below that exhibited by the patient prior to treatment. Intraocular. . .

DETD . . . generally considered below about 8 mm Hg. Such conditions may result from a variety of causes, such as surgery for **glaucoma**, retinal detachment, uveitis, and the like.

DETD [0048] The exemplified inhibitors described in detail in the Examples include **cariporide**, EIPA (ethylisopropylamiloride), DMA (dimethylamiloride) and amiloride, at concentrations characteristic of the NHE-1 isoform. Nevertheless, applicable compounds would include any of. . . such as timolol), or amiloride analogs, as well as, but not limited to, the many compounds produced by Hoechst, i.e., **cariporide**, as well as other compounds that would be recognized as modulators of Na.sup.+ uptake or the anion exchange system. See, . .

DETD . . . composition, which can include drugs, compounds, pharmaceuticals or the like, can be used to treat an individual, such as a **glaucoma** patient.

DETD . . . and Cl.sup.- /HCO.sub.3.sup.- antiports) and the effect of blocking both, also explains the clinical efficacy of carbonic anhydrase inhibitors in treating **glaucoma**. Reducing the availability of H.sup.+ and HCO.sub.3.sup.- to both antiports, thereby synergistically inhibits the initial step in aqueous humor secretion. . . this step could be selectively blocked in glaucomatous patients by specifically inhibiting NHE-1 with low concentrations of EIPA, DMA or